


THE INFLUENCE OF SINGLE MOTHERS' ALCOHOL MISUSE ON THE WELLBEING OF THEIR FAMILIES: REFLECTIONS OF SOCIAL SERVICE PROVIDERS

by

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The crest of Stellenbosch University is centered behind the text. It features a shield with various symbols, topped by a crown and flanked by two lions. The shield is divided into sections of red, blue, and gold.

**THESIS PRESENTED FOR THE DEGREE OF
MASTER OF SOCIAL WORK
IN THE FACULTY OF ARTS AND SOCIAL SCIENCES
AT
STELLENBOSCH UNIVERSITY**

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March 2020

DECLARATION

By submitting this thesis electronically, I, Prudence Shozi, declare that the entirety of the work contained within this research study is my own, original work. That I am the sole author thereof (unless to the extent explicitly otherwise stated), that reproduction and publication thereof by University of Stellenbosch will not infringe any third-party rights and that I have not previously in its entirety or in part submitted it for obtaining a qualification.

March 2020

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ACKNOWLEDGEMENTS

This thesis becomes a reality with the kind support and help of many individuals, I would like to extend my sincere thanks to all of them.

Foremost, praises and thanks to **God Almighty**, for His blessings and the wisdom He granted throughout to complete this research study.

I would like to express my deep and sincere gratitude to my research supervisor, Dr I. Slabbert for her invaluable guidance with patience throughout this research study.

I would also like to express my gratitude and many thanks to the Department of Social Work for giving me the opportunity to complete this research. A special thanks to Prof LK Engelbrecht for making the impossible possible, especially for his incredible connections to The Orton-Howard Scholarship. My gratitude goes to Dianne Orton and Gordon Howard for the opportunity I was granted. I would also like to thank Mrs RC Williams for her constant emotional support by motivating us when overwhelmed by work.

To my language editor, Mrs Jana Walters, thank you so much for the hours you spent on editing my thesis. You did an amazing job. To my technical editor, Mrs Connie Park, thank you for the professional manner you took care of the technical aspects of this thesis.

I am highly indebted to my beloved and supportive husband Thandile Ngxumza by encouraging me throughout this journey and my lovable daughter Favour Ngxumza, who served as my inspiration to pursue this undertaking. Special thanks to my family, especially, my grandmother Maud Shozi for always believing in me and her constant prayers and support.

I am extremely grateful to my lovely parents Mr and Mrs Dreyer and their lovely daughters Kim and Demi for their love, caring and sacrifices in preparing me to complete this research study. The kind of love they have given my daughter is astonishing.

I would also like to express my special gratitude to my dear colleague Sinazo, for all kinds of support, especially emotionally, we shared throughout this research journey. My thanks and appreciation also goes to Mr NJ Xaba for his genuine support, also my friends and colleagues who have willingly helped me out with their best qualities.

Finally, my thanks go to all the people who have supported me to complete the research work whether directly or indirectly.

ABSTRACT

Alcohol misuse is a huge social challenge in South Africa that has disastrous effects on the wellbeing of individuals, families, communities, and society. Single mothers are especially vulnerable to alcohol misuse due to the many challenges they face such as coping alone with parenthood and dealing with financial restraints and a lack of resources. These mothers often misuse alcohol in order to cope and deal with their stress. The aim of this study was to describe the influence of single mothers' alcohol misuse on the wellbeing of their families as reflected by social service providers. Four objectives were formulated to meet the aim of the study.

Utilising the Ecological Systems Theory as theoretical framework, the study attempted to understand amongst other how different components and dynamics such as family, community, and institutions interconnect or influence single mothers who misuse alcohol. Indicators of family wellbeing such as education, finance, emotional, psychological, and spiritual aspects were also explored to gain a better understanding of families where the single-mother misuse alcohol.

A qualitative approach with an exploratory and descriptive nature was utilised in this study. The researcher made use of purposive and snowball sampling to obtain the sample of 20 social service providers who render services to individuals, groups, and communities that are affected by single mothers who misuse alcohol. Social service providers consisted of social workers, educators, as well as a community worker. Certain criteria for inclusion applied. A semi-structured interview guide was used to collect the data. Ethical clearance was obtained for this study. Themes, subthemes and categories were used to analyse the data. Data verification was also done to ensure the truth value, applicability, consistency, and neutrality of the study.

By following an empirical method with the investigation, the reflections of social service providers regarding the influence of single mothers' alcohol misuse on the wellbeing of their families could be gathered. Four themes were identified, namely the microsystem, the mesosystem, the exosystem and the macrosystem. Relevant tables, figures and participant narratives, were used to further substantiate the analysis of data.

Through the literature and empirical investigation, relevant conclusions and recommendations were made in order to improve service rendering to single mothers who misuse alcohol, and to their families.

OPSOMMING

Alkohol misbruik is 'n groot uitdaging in Suid Afrika met vernietigende gevolge vir die welstand van individue, gesinne, gemeenskappe, en die samelewing. Dit is veral enkelmoeders wat kwesbaar is tot alkoholmisbruik vanweë talle uitdagings soos enkelouerskap, finansiële beperkings en gebrek aan bronne. Hierdie moeders misbruik dikwels alkohol in 'n poging om hulle stres te hanteer. Die doel van hierdie studie was dus om die invloed van alkohol misbruik van enkelmoeders op die welstand van hulle gesinne te beskryf soos gereflekteer deur maatskaplike diensverskaffers. Vier doelwitte was geformuleer ten einde die doel van die studie te bereik.

Die Ekologiese Sisteemteorie is as teoretiese raamwerk benut om insig in te win oor hoe nou verweef verskillende komponente en dinamika soos die gesin, die gemeenskap en instellings is met enkelmoeders wat alkohol misbruik. Indikatore van die welstand van 'n gesin soos opvoedkundige, finansiële, emosionele en geestelike aspekte is ook geëksploreer ten einde meer insig te bekom oor die enkelmoeder-gesin waar alkohol misbruik word.

'n Kwalitatiewe navorsingsbenadering met 'n beskrywende en eksplorerende aard is gevolg in hierdie studie. Die navorser het gebruik gemaak van doelbewuste en sneeubal steekproeftrekking om die steekproef van 20 deelnemers te bekom. Die deelnemers was almal maatskaplike diensverskaffers wat dienste lewer aan individue, groepe en gemeenskappe wat geaffekteer word deur alkoholmisbruik. Sekere kriteria vir insluiting het gegeld vir die deelnemers. 'n Semi-gestruktureerde onderhoudskedule was gebruik om die data in te samel. Die data is geanaliseer deur dit in temas, sub-temas en kategorieë te verdeel. Data verifikasie was ook gedoen ten einde die geloofwaardigheid, toepaslikheid, konsekwentheid, en neutraliteit van die studie te verseker.

Die refleksies van maatskaplike diensverskaffers is empiries ondersoek rakende die invloed van enkel moeders wat alkohol misbruik op die welstand van hulle gesinne. Vier temas is geïdentifiseer naamlik die mikrosisteem, die mesosisteem die eksosisteem en die makro sisteem. Relevante tabelle, figure, asook die narratiewe van die deelnemers is benut om die geanaliseerde data te staaf.

Deur literatuur en die empiriese ondersoek is relevante gevolgtrekkings en aanbevelings gemaak te einde dienslewering aan enkelmoeders wat alkohol misbruik en hulle gesinne te verbeter.

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CHAPTER 1:

INTRODUCTION

1.1 PRELIMINARY STUDY AND RATIONALE

Alcohol misuse is one of the biggest social problems in South Africa. According to the 2015 *Global Status Report on Road Safety*, compiled by the World Health Organisation (WHO), 13 273 people died on South African roads in 2014, with 58 percent of those in alcohol-related deaths. The South African Medical Journal (2012) maintains that alcohol misuse also contributes to negative social behaviour such as crime (murder, assault, rape, robbery, etc.), interpersonal – including domestic – violence, sexual offences against children, unsafe sex and sexual promiscuity with transmission of sexually transmitted diseases (STDs), foetal alcohol spectrum disorder (FASD), child neglect, and truancy (Seggie, 2012). It is thus clear that alcohol misuse contributes to several social problems and requires a scientific interrogation.

The WHO shows that alcohol misuse is prevalent across the world (WHO, 2016). Butcher, Mineka and Hooley (2010:34) describe alcohol misuse as a “maladaptive pattern of drinking, leading to clinically significant impairment or distress and eventually resulting in a failure to fulfil major obligations at school, work or home”. It is thus no wonder that parental alcohol misuse plays a significant role in the disruption of the wellbeing of families. The co-existence of alcohol misuse and family problems is recognised as a major public concern, particularly in South Africa (Neger & Prinz, 2018).

According to the WHO (2016), South Africa is ranked among the top 20 biggest drinking nations in the world. Among the drinking population, South Africans consume in the region of 27 litres of pure alcohol per capita per year which is one of the highest rates in the world. Furthermore, the average alcohol consumption of South Africans is almost double than that of other countries in the African region who use an average of 6 litres per capita. In an article of Business Tech (2018) it is stated that South Africans are drinking themselves to death and that up to one in ten deaths in South Africa are related to alcohol misuse.

The National Household Surveys indicate that there are higher prevalence rates for alcohol misuse among single-parent families (Lipari & Van Horn, 2017). Furthermore, results from National Statistics about the status of alcohol use in South Africa (2018) highlight that it is not only extremely necessary to be aware of problems related to alcohol misuse but that it is also increasingly necessary to take action to address these problems (Peacock, Leung, Larney, Colledge, Hickman, Rehm, Giovino, West, Hall, Griffiths & Ali, 2018).

These statistics inspired the researcher to conduct this study in order to gain an understanding of the effects of alcohol misuse of single mothers on the wellbeing of their families. Researchers such as Peltzer, Ramlagan and Davids (2008) point out that alcohol misuse in South Africa vary by region. This study was conducted in the Western Cape, where alcohol remains the most frequently misused substance.

Richter and Lemola (2017) maintain that single parenthood is gradually becoming more common in Western societies. In the United States alone, single mothers are raising as many as 27.5 percent of children by themselves. Because so many single mothers become overwhelmed with the task of raising children without partner assistance, it can be argued that such families are more vulnerable to alcohol misuse (Richter & Lemola, 2017). Apart from raising children by themselves, South African Statistics (2019) also shows that in single-parent households, women tend to be the primary caregiver. Almost half of South African children are raised by single parents, 39 percent of those are raised by single mothers who misuse alcohol. These figures confirm the finding of Jacobs and Jacobs (2013) who state that in several cases, the challenges they face are the result of alcohol misuse.

Many researchers argue that being a single mother can be challenging since the single mother often try to compensate for the absent parent while also dealing with the emotional, physical and mental needs of her children. The challenges that a single mother face can lead to their burnout, which in turn would interrupt the child's development, influencing the social and emotional development of that child (Jacobs & Jacobs, 2013). To understand the effect of a single mother's alcohol misuse on the wellbeing of her home, more research should be conducted in order to improve service rendering to this group.

If more research can be done about single mothers who misuse alcohol, better insight can be gained that could lead to better service rendering for single mothers and their families. According to the views of Peltzer et al. (2000), more emphasis should be placed on the shortage of resources and facilities in order to help these adverse families. One of their major concerns was the accessibility and the availability of resources to those in need making it clear that Western Cape service providers need to consider and address this matter.

According to the South African Race Relations Institute (2013), single mothers raise the majority of children in South Africa. It is quite common to find women raising children on their own without the presence of their fathers. This can be attributed to several factors, ranging from historically induced migrant labour, the effect of capitalism and a supply and demand for labour, to health issues such as the effect of HIV/AIDS. Only a little more than 30 percent of children grow up with both parents, whereas 18 million young citizens come from single-headed families (Peltzer et al., 2000).

Within this context, many studies have found a correlation between alcoholic single mothers and child maltreatment (Mahato, Ali, Jahan, Verma & Singh, 2009). Nearly 60 percent of child maltreatment is the result of a single-parent misusing alcohol. Single mothers misuse alcohol often as a means to cope with the challenges they face, such as raising a family without the support of another parent (Dube, Anda, Felitti, Groft, Edwards & Giles, 2001). Several researchers (Laslett, Mugavin, Jiang, Manton, Callinan, MacLean & Room, 2015; Mahato et al., 2009) argue that most children in families where single mothers misuse alcohol are more likely to experience complex problems, including poor physical, intellectual, social, and emotional development than children who are living in families where substance use is not problematic.

1.2 PROBLEM STATEMENT

From the abovementioned discussion it is clear that the wellbeing of single-parent families is negatively affected when a parent misuses alcohol. Alcohol misuse can affect the manner in which family members interact. This can lead to more problems within these families (Mahato et al., 2009). Because the misuse of alcohol normally

undermines parents' capacity to apply effective parenting skills problems often have a negative effect on their children.

Numerous studies such as those of Mahato et al. (2009); Jones, Forehand, Brody and Armistead (2003) indicate that children who grow up in single-parent families have more negative outcomes than those with both parents and that this situation becomes worse when a single mother is misusing alcohol.

Researchers such as Visser (2007), Cann (2013) and Kühn and Slabbert (2017) have extensively studied substance abuse, however, very little studies have been done about single mothers misusing alcohol. The Nexus data base, for example, has shown that no study was conducted in the last five years in the social work environment regarding the misuse of alcohol by single mothers in the Western Cape. Consequently, this study sets out to fill the void by focusing on reflections of social service providers about the effects of single mothers who misuse alcohol and the wellbeing of their families in the Western Cape. Alcohol misuse and family structure are inevitably related to the wellbeing of parents and children in the family as such the scope of this problem exists at multiple levels of caring. The theory deemed most appropriate for this study's foundation is therefore the Ecological Systems Theory.

1.3 RESEARCH QUESTION

From the abovementioned discussion the following research question was formulated: "What is the impact of alcohol misuse of single mothers on the wellbeing of their families according to social service providers?"

1.4 AIM OF THE STUDY

In view of the research problem explained above, the main aim of the research was to investigate an understanding of the influence of single mothers' alcohol misuse on the wellbeing of their families from the perspective of social service providers.

1.5 OBJECTIVES

Maree (2016) argues that the objectives of a study should be clearly stated and specific. Therefore, to achieve the aim of this study, the following research objectives were formulated:

- To present the nature and extent of alcohol misuse and its influence on individuals, families, and communities.
- To describe the family wellbeing affected by alcohol misuse of single mothers within the ecological systems theory
- To empirically investigate the influence of alcohol misuse of single mothers on the wellbeing of their families as reflected by service providers.
- To develop relevant conclusions and recommendations regarding alcohol misuse in single-parent families.

1.6 THEORETICAL FRAMEWORK

Bryman (2012) argues that a theory is important to social research because it provides a backcloth and rationale for the research that is being conducted. It also provides a framework within which social phenomena can be understood and the research findings can be interpreted. The vision of the White Paper on Families (RSA, 2013) focuses on the “well-functioning families that are loving, peaceful, safe, stable, and economically self-sustaining, and that also provide care, and physical, emotional, psychological, financial, spiritual, and intellectual support for their members”. This leads to the following questions: how the wellbeing of single-parent families would be affected by alcohol misuse without the above-mentioned characteristics, and what type of support do these single-parent families receive?

The White Paper on Families (RSA,2013) also cited increasing economic stress as a significant contributor to problems in the functioning of families mostly because many families live in poverty. Within the context of economic stress, it can be said that single-parent families are often the most affected families thus causing more strain and stress for the children of single-parent families (RSA, 2014). Within the above context the researcher intended to study how the wellbeing of single-parent families is affected by the misuse of alcohol.

Through socialisation, the foundation is laid for children to be tolerant of other so as to become active and responsible citizens. It is therefore also clear that alcohol misuse by the single mother not only affect the wellbeing of single-mother families, but that alcohol misuse affects the whole family system, including the children.

According to Friedman and Allen (2011) the Ecological Systems Theory provides a better understanding of the components and dynamics of client systems and that this helps interpret problems and develop balanced intervention strategies, while keeping in mind the enhancement of the “goodness of fit” between individuals and their environments. On the other hand, it will also be helpful to explore larger systems that could affect the wellbeing of families. This is where the ecological perspective can be applied. Johnson and Yanca (2010) define ecological perspective as a human that cannot be separated from the larger systems in which humans’ function. This includes families, small groups, the community and social institutions such as schools, churches, and social agencies.

This study will focus on the White Paper, as well as the perspective of the Ecological Systems Theory as indicated above as this approach will enable the researcher to understand the wellbeing of each individual within the family affected by alcohol misuse as well as the environment, with reference to their interlinked layers of social development and interaction. These interlinked layers of social interaction is discussed by Bronfenbrenner (1979) in his reference to the four systems that make up the interplay of human development in the environment, namely, the microsystem (family and friends), the mesosystem (connection between family and agency), the exosystem (the community surrounding the family), and finally the macrosystem (the culture of the family or a system of governmental forces) (Bronfenbrenner, 1992).

1.7 CONCEPTS AND DEFINITIONS

1.7.1 Alcohol misuse

In common usage, the term alcohol misuse refers to drinking alcohol excessively and, in more volumes, than the lower-risk limits of alcohol consumption. With excessive alcohol consumption comes short-term risks that include domestic violence, accidents and injuries requiring hospital care, unprotected sex that could lead to sexually transmitted infections. Long term risks of alcohol misuse are heart disease, strokes, liver disease, liver cancer, etc. The World Health Organisation (WHO) defines alcohol misuse as something that places people at risk for problems, including “at-risk use” which refers to clinical alcohol abuse and dependence (WHO, 2011). Nursing times.net indicates that alcohol misuse can be referred to as the excessive alcohol consumption

that can affect your physical and mental health, your work, and your social and personal relationships (www.nursingtimes.net).

Fisher and Harrison (2013) state that alcohol misuse refers to a person's experience of tolerance towards alcohol, withdrawal symptoms, drinking to alleviate withdrawal symptoms, and a loss of control and obsessive drinking. The wellbeing of a person who misuse alcohol as well as the wellbeing of significant others such as family are threatened by alcohol misuse. The physical, psychological, social, and spiritual aspects of a person are all affected with alcohol misuse. When alcohol is misused on a regular basis it can lead to Alcohol Use Disorder (AUD). AUD is seen as a primary disease that is chronic, progressive, and potentially fatal (Fisher & Harrison, 2013).

1.7.2 Single mothers

Single mother is the term that refers to a mother who has the responsibility of being the primary caregiver and the parent that children reside with (Duncan & Edwards, 2013). According to these authors, a single parent is a parent who cares for one or more children without the assistance of another parent at home. Single parenthood may occur for variety of reasons. It could have been chosen by a parent through divorce, adoption, artificial insemination, and surrogate motherhood, or it could be the result of an unforeseeable occurrence such death or abandonment by the other parent.

1.7.3 Family

In a broad sense, a family is defined as a collective body of persons who live in one house under one head or management (RSA, 2013). According to the Law Dictionary (2016), a family encompasses a father, mother, and children. In a wider sense it may include domestic servants, all who live in one house under one head. Nanda and Warms (2010), define family as "a group of blood relatives, all relations who descend from a common ancestor".

1.7.4 Wellbeing

Wellbeing is a term often found in the description of social work values and codes of conduct (Gamble, 2012). In the National Association of Social Workers' (NASW) Code of Ethics, the preamble begins, "The primary mission of the social work profession is to enhance human wellbeing . . ." and later, "A historic and defining feature of social

work is the profession's focus on individual" wellbeing in a social context and the wellbeing of society" (2008, preamble). The Council on Social Work Education (CSWE), in its Educational Policy and Accreditation Standards ([EPAS], 2008), states that "the purpose of the social work profession is to promote human and community wellbeing". Clearly, wellbeing plays a central role in what social workers are trying to promote and enhance. The International Federation of Social Workers (2014) also addresses the wellbeing of people as follows: "Underpinned by theories of social work, social sciences, humanities and indigenous knowledges, social work engages people and structures to address life challenges and enhance wellbeing." Wellbeing is thus central to the social work profession.

1.7.5 Social service providers

Social service providers are defined as providers in the front line in identifying and addressing issues of victimisation and vulnerability. These service providers confront broken lives on a daily basis. In this respect, social workers, church leaders, and community leaders fall under social service providers and are regarded as people who promote social change, problem solving in human relationships, and the empowerment and liberation of people to enhance wellbeing.

Utilising theories of human behaviour and social systems, social work intervenes at the point where people interact with their environments. And within this framework, principles of human rights and social justice are fundamental to social work (Hare, 2000).

1.8 RESEARCH METHODOLOGY

Babbie and Mouton (2010) maintain that research methodology should focus on whom or what the researcher is intending to study in order to collect data through identifying the subjects and their availability, and important theoretical terms. This section entails the research approach which was utilised throughout the research. It also includes a description of research design, sample size, methods of data collection, research instruments, and data analysis.

1.8.1 Research approach

A qualitative research approach was adopted to gather detailed data while providing the reflections and views of the respondents in their own voices and gaining insight from their perspectives (Bryman, 2012). According to Bryman (2012), “qualitative research strategy is more concerned about the words than figures in the collection of data”. For Babbie and Mouton (2010), qualitative researchers always attempt to study human action from the insider’s perspective. This is referred to as the “emic” perspective.

Babbie and Mouton (2010) further state that the goal for qualitative research is to describe and understand rather than explain and predict human behaviour. The researcher’s focus is to investigate the effects of alcohol misuse on the wellbeing of single mothers with reference to what social service providers regard as the most common effects. The emphasis of this research project is therefore on methods of observation and analysis of the results. This qualitative approach allows the researcher to apply observation methods such as unstructured interviews, participant observation and the use of personal documents for data collection. Additionally, this research was unstructured to allow for flexibility with all aspects of the process.

The research also followed both deductive and inductive reasoning. According to Bryman (2012:14), “deductive theory characterises the commonest view of the nature of the relationship between theory and social research”. The main difference between a deductive and an inductive approach to the research is that a deductive approach is concerned with developing a hypothesis based on existing theory and then designing a research strategy to test the hypothesis, while, an inductive theory is concerned with the generation of new theory emerging from data (Bryman, 2012). Therefore, the researcher followed a deductive research approach by formulating research interviews for data collection based on the literature study. By applying the inductive approach, the researcher interpreted the findings of this study utilising previous research studies.

1.8.2 Research design

To explore and describe the influence of alcohol misuse on the wellbeing of single-mother families, the researcher utilised both descriptive and exploratory research. De Vos, Strydom, Fouche and Delport (2011:96) argue that, “descriptive research

presents a picture of the specific details of a situation, social setting, or relationship, and focus on 'how' and 'why' questions". The most important aspect of applying this type of design is that it allows the researcher to describe findings respectively. In addition, the appropriateness of these designs will allow for the in-depth exploration of this phenomenon. In this study the researcher described how the misuse of alcohol by a single mother influences the wellbeing of her family as perceived by social service providers.

To gain an in-depth insight into a community or individual situation, De Vos et al. (2011) suggest the exploratory design. Hence, the exploratory design will be used to provide basic familiarity to a selected topic. This approach is also typically utilised when a researcher examines a new interest or when a subject of study is relatively new (Babbie & Mouton, 2010). For the purposes of this study the researcher conducted an empirical study to explore how service providers view the influence of alcohol misuse of a single mother on the wellbeing of her family.

1.8.3 Sample

Sampling is defined as the process of selecting several individuals for a study in such a way that the individuals represent the larger group from which they were selected. A sample is a smaller collection of units from a population used to determine truths about that population (De Vos et al., 2011). The researcher chose purposive sampling because this sampling method allows the researcher to choose the participants, to ensure that sample members differ from each other in terms of key characteristics relevant to the research question (Bryman, 2012).

In addition, the researcher used snowball sampling to avoid the limitation of the selected participants. Babbie and Mouton (2010) are of the view that this type of sampling is appropriate when the members of a special population are difficult to locate. The method of sampling utilised was to obtain more participants for this study.

There were certain criteria for inclusion as mentioned below. Participants had to:

- render services to individuals, groups, and communities that are affected by the misuse of alcohol of single mothers.
- have at least two years' work experience; and

- be able to communicate in English.

Eventually, the researcher collected data from a sample of 20 participants consisting of social service providers, teachers, and community leaders. They were selected because they had experience of working with single mothers, working for the wellbeing of families, as well as working with mothers who misuse alcohol. The participants were contacted in their personal capacity via email and telephone. Permission from organisations were thus not required. The study was conducted in the Western Cape since this was the most accessible area for the researcher.

1.8.4 Instrument for data collection

Data collection refers to gathering data from the sample in order to answer the research questions (Bryman, 2012). Since this study was qualitative, semi-structured, one-on-one interviews were the most appropriate to capture the content of selected participants as they shared their experiences.

De Vos et al. (2011) maintain that in general, researchers use semi-structured interviews to gain a detailed picture of a participant's belief about, or perceptions and, or accounts of a topic. This method gives the researcher and the participants much more flexibility. The researcher used semi-structured one-on-one interviews to gain in-depth information from the participants.

According to Babbie and Mouton (2010), one-on-one interviews are the most common method to collect data rather than asking respondents to read questionnaires and enter their own answers. By using this method, the researcher could ask questions orally and record respondents' answers, ensuring that the researcher could gather detailed information about the wellbeing of single mothers who misuse alcohol and their families as viewed by social service providers.

In addition, the researcher audiotaped the interviews. A tape recorder allows a much fuller record than notes taken during the interview (De Vos et al., 2011). This also allowed the researcher to concentrate on how the interview proceeded. Consequently, the researcher asked permission from the participants to record them. A further advantage of recording interviews during data collection is that the researcher can attend to the participant knowing that she can go back to the recording after the

interview in order to transcribe and make sense of findings. Interviews were conducted in a private area at a venue that was convenient for the participants.

1.8.5 Data analysis

For the data, thematic analysis was used. This approach was the most appropriate as the researcher conducted face-to-face interviews and audio recordings. After gathering data, recorded interviews had to be transcribed to be organised and analysed (De Vos et al., 2011). Because a thematic analysis was used core themes, sub themes and categories could be defined after collecting the data. Bryman (2012), suggest that a qualitative research strategy that uses this form of analysis are indicative of adopting a thematic approach. Thematic analysis was thus useful as the researcher analysed the data according to themes and patterns for the most repeated information after data collecting.

1.8.6 Data verification

The data collected was also verified. Guba's model in Krefting (1991) was used to ensure that the research was of good the quality.

Regarding the **truth value** of the study De Vos et al. (2011) refer to the credibility and the authenticity of the study. In this study the researcher applied interview techniques typically used for qualitative research such as open-ended questions.

Regarding the **applicability** of the study De Vos et al. (2011) refer to the transferability of the study. The researcher enhanced the applicability of this study by collecting rich data and obtaining a "thick description".

Regarding **consistency** De Vos et al. (2011) mention the dependability of the study, thus referring to whether the research process is well documented. For the purposes of this study the researcher made use of a dense description, as well as a literature control after each theme and subtheme. An independent coder was also used to ensure consistency (See Annexure D).

Concerning **neutrality** De Vos et al. (2011) state the conformability of the study. The researcher made use of field notes and transcripts of the interviews. Member checking was also done where three participants could read through their transcribed interviews

to ensure that it was a true reflection of the interviews (See Annexure E). The researcher also had regular meetings with her supervisor to ensure that as far as possible her own personal views did not affect the research process and writing of the research document.

1.8.7 Ethical clearance

Ethics is typically associated with morality as both deal with matters of right and wrong (Babbie & Mouton, 2010). Therefore, the researcher applied voluntary participation as participants could volunteer to be part of the study. Participants also agreed that the topic of the study were not harmful to them. Babbie and Mouton (2010) stress that social research should never injure the people being studied, regardless of whether they volunteer for the study or not. This was a low risk study, as the researcher did not directly deal with the target group. Ethical clearance for this study was also obtained (See Annexure C)

The principle of confidentiality was applied during the study. This means that any information that was obtained in connection with this study and that could identify the participants was anonymised and kept confidential. Only the researcher and the supervisor had access to the information. Confidentiality was maintained by keeping data in a password protected computer where the researcher was the only one with access.

In addition, the researcher ensured that informed consents were given to all participants prior to data collection. The researcher had to explain in detail the purpose of the study and how the information was going to be collected and utilised. With the informed consent the participants could decide in favour or against the study.

1.9 LIMITATIONS OF THE STUDY

The following limitations of the study were noted:

- This was a qualitative study; therefore, the findings cannot be generalised.
- The study was conducted only in one province, namely the Western Cape.
- The sample was fairly small; however, the research still obtained a thick description of data.

- The researcher interviewed social service providers and not the target group of single mothers who misuse alcohol, but still managed to gain valuable information and data.

1.10 CHAPTER OUTLINE

There are five chapters in this research study. Chapter 1 presents the introduction of the study. Chapter 2 focuses on the nature and extent of alcohol misuse and its influence on individuals, families, and communities. Chapter 3 describes the family wellbeing affected by alcohol misuse of single mothers within the Ecological Systems Theory. Chapter 4 provides reflections of social service providers regarding the influence of alcohol misuse on single-mother families. Chapter 5 presents the relevant conclusions and recommendations for further interventions concerning the wellbeing of single-mother families affected by alcohol misuse.

CHAPTER 2:

AN OVERVIEW OF ALCOHOL MISUSE AND ITS INFLUENCE ON INDIVIDUALS, FAMILIES, AND COMMUNITIES

2.1 INTRODUCTION

Since the 1960s, substance misuse has been on the rise and has been causing negative effects for people across the world. Many researchers (Bhardwaj, 2016; Fisher & Harrison, 2013; Musto, 1996) have indicated that substance misuse can lead to impairment or distress in many different ways. In addition, the misuse of substances is physically hazardous and could lead to injuries, permanent illnesses, and sometimes violence. Persistent and recurrent social and interpersonal problems are often a result of substance misuse or are exacerbated by substance misuse (Gilchrist, Moskalewicz, Nutt, Germen, Valkova, Kantchelov, Stoykova, Bujalski & Poplas-Susic, 2013).

Stein, Ellis, Thomas, and Meintjie (2012) highlight the severity of a range of negative consequences of substance abuse across the world. These include medical and psychiatric disorders, risky sexual behaviour and sexual transmitted diseases, crime and violence, family dysfunction, as well as road accidents. In South Africa, for instance, the rate of domestic violence drastically increased, this increase could to a degree be attributed to the relationship between substance misuse and aggression (Leonard, 2005).

This chapter deals with objective one of the study, namely, to present an overview of alcohol misuse and its influence on individuals, families, and communities. A theoretical discussion on alcohol misuse as well as existing policy initiatives follows.

2.2 TERMS ASSOCIATED WITH SUBSTANCE MISUSE

Fisher and Harrison (2013) indicate that terminology in the alcohol and other drug fields can be confusing. In some cases, one author may have a very specific meaning for a term, while another may use the very same term in a more general sense, or two authors may use different terms with a purpose of addressing the same meaning,

whereas one term can be used for different meanings. The following definitions are of significance.

2.2.1 Use

Psychologically, the term “use” means to consume any type of substance such as alcohol or drugs. Simply put, “use” means to drink alcohol, and when referring to other substances, to swallow, to smoke or to inject substances (Fisher & Harrison, 2013). According to the South African Alcohol Policy (2014) using alcohol is legal but misusing or abusing it is illegal. Van Krosigk, Nel, Bezuidenhout, Lake, Ure, Austin, Jordaan and Pillay (2009) argue that using alcohol or other drugs does not necessarily have negative consequences if used moderately. According to them, substance use does not always lead to addiction and many people occasionally use alcohol or certain drugs without being or becoming addicted. However, it should always be noted that substance use usually comes with a risk that the use might lead to addiction. Several authors (Dada, Burnhams, Laubsher, Parry & Myers, 2018; Leonard, 2005; Point, 2006) emphasise the danger of using substances and indicate that the using of most chemical substances have several harmful consequences, not only for the user, but also for their families, communities, and society at large.

2.2.2 Misuse

The Merriam Webster’s dictionary (1989) defines the term misuse as “the act of using something incorrectly or improperly”. The term misuse in this research document refers to alcohol consumption which leads a person to experience social, psychological, physical, or legal problems related to intoxication or regular excessive consumption and/or dependence (National Drug Treatment Centre, 2019). When you misuse a substance, it causes harm to the individual, their significant others, or the wider community. By definition, those requiring drug treatment are drug misusers. The same principle applies to alcohol misuse (Fisher & Harrison, 2013).

2.2.3 Abuse

According to Department of Social Development, the National Drug Master Plan (2013-2017) substance abuse is the “misuse and abuse of legal or licit substances such as nicotine, alcohol, over-the-counter and prescription medication, alcohol concoctions,

indigenous plants, solvents, and inhalants, as well as the use of illegal or illicit substances” (DSD, 2013:19). Abusing drugs may refer to the use of drugs with the aim of intoxication (Fisher & Harrison, 2013). The term “substance abuse” also refers to when a person consumes alcohol or drugs regularly, even though these substances cause negative issues in their lives (National Institute on Drug Abuse, 2018).

These issues may be related to their employment, their personal life, or even their safety. People who abuse drugs and alcohol continue to consume them, regardless of the negative consequences.

2.2.4 Intoxication

Intoxication refers to a state of being under the influence of alcohol or other drugs so that thinking, feeling and/or behaviour is affected (Fisher & Harrison, 2013).

2.2.5 Addiction

Addiction as defined by National Institute on Drug Abuse (2018) is a chronic disease characterised by drug seeking and use that is compulsive, or difficult to control despite harmful consequences. Addiction may also be referred to the habitual use of any kind of substances including alcohol and other drugs that leads to compulsive behaviours (Fisher & Harrison, 2013).

2.2.6 Substance Use Disorder (SUD) and Alcohol Use Disorder (AUD)

According to the Diagnostic and Statistical Manual of Mental Disorders (DSMV) Substance Use Disorder (SUD) is a diagnosis based on pathological patterns of behaviours related to the use of substances measured on a continuum from mild to severe (APA, 2013).

Alcohol Use Disorder (AUD) relates to the continued use of alcohol regardless of the physical, social, and mental consequences for the user. Before an AUD is developed, a pattern of drinking usually occurs as will be discussed below.

2.3 PATTERNS OF ALCOHOL CONSUMPTION

Several researchers (Dada et al., 2018; Fisher & Harrison, 2013; Stein et al., 2012) have extensively reported on the negative consequences of alcohol misuse. Therefore, it is important for social service providers to be aware of when alcohol consumption becomes problematic and the patterns associated with consumption of alcohol. The patterns that will be discussed are social drinking, heavy drinking, binge drinking, alcohol addiction, and alcohol dependence.

2.3.1 Social drinking

Moderate social drinking is perceived as normal and harmless since it is a popular way of socialising, relaxing, and celebrating special occasions. Since alcohol is such a widely available product there is confusion about what social and medical acceptable norms of consumption should be (Carrigan, Ham, Thomas & Randal, 2008).

According to alcohol misuse researchers, the issues about risk, reward, and possible consequences are obscured due to ingrained cultural attitudes that largely remain unchallenged. This results in an unclear definition for the term social drinking because some societies view social drinking as widely accepted with no danger to the user.

Social drinking is also seen as the infrequent consumption of alcohol and usually indicates drinking responsibly. Alcohol researchers such as Fairbairn, Sayette, Aalen and Frigessi (2015) found that social drinkers are also known as casual drinkers since people who drink socially are not drinking frequently, they drink occasionally and responsibly. However, several researchers (Carelse, 2018; Jacobs, 2018; Lewis, Dana & Blenvis, 2011) highlight that occasional and social drinking can also lead to an Alcohol Use Disorder (AUD) as discussed under point 2.2.6. If social drinking happens regularly (for instance three to five times a week) it could also lead to health problems such as, glucose imbalance, infertility, heart arrhythmia, and arthritis (Carrigan et al., 2008).

2.3.2 Heavy drinking

According to Christensen (2016), heavy drinking differs from men to women due to biological differences between the two sexes such as hormones and body weight.

Eight or more drinks for women per week and fifteen or more for men can be seen as heavy drinking. Therefore, health agencies consider a gender difference to show how women's bodies are more vulnerable to heavy alcohol intake compared to that of men. This is due to women typically having smaller bodies than men, and because women metabolise less alcohol in the stomach than men, causing more alcohol to end up in their blood stream.

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) (2015) shows that the definition of heavy drinking has evolved in the past two decades and is now based on scientific evidence about the harmful consequences of using alcohol heavily. These consequences could include the onset of chronic diseases of the liver, pancreas, and larynx, or high blood pressure, psychological, or behavioural problems, or a combination of the above. What is clear is that heavy users of alcohol stand a chance of becoming alcoholics (NIAAA, 2015).

2.3.3 Binge drinking

Wechsler and Nelson (2008) refer to binge drinking as drinking excessively within a specific time which could result in a sustained period of intoxication. Binge drinking has been a controversial phenomenon in South Africa especially during the post-apartheid era. It is commonly said that South Africans binge drink without realising the serious consequences thereof. Although alcohol is part of most people's lives, especially during times of celebration and entertainment (Macionis & Plummer, 2012), disparities related to alcohol problems often start when people binge drink.

There are two separate meanings ascribed to the term binge drinking. Firstly, it is used to describe "a pattern of heavy drinking that occurs over an extended period set aside for the purpose ... usually defined as more than one day drinking at a time ... a binge or bout drinker is one who drinks predominantly in this fashion, often with intervening periods of abstinence" (Herring, Berridge & Thom 2008:21).

Secondly, binge drinking is used to describe a single drinking session leading to intoxication, often measured as having consumed several drinks on one occasion. Alternative terms are used, including heavy episodic drinking, risky single-occasion drinking, heavy sessional drinking, and simply, heavy drinking. It is this second

meaning of the term that has become widely used over recent years by researchers and politicians alike (Herring, Berridge & Thom 2008).

A detailed breakdown for binge drinkers provided by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) (2015) indicates that men who consume five drinks in about two hours are binge drinking, as are women who consume four drinks in about two hours.

As a result, the NIAAA suggests that this drinking behaviour could increase blood concentration since the body's vital organs are suffering to perform its job in clearing out consumed alcohol in a very short time span (NIAAA, 2015). Authors such as Carey (2001), Ellis et al. (2012), and Fisher and Harrison (2013) emphasise the harmful effects of binge drinking.

2.3.4 Alcohol addiction

Guidelines on the difference between alcohol addiction and alcohol dependence highlight the fine line between alcohol misuse and alcohol addiction. According to these guidelines, alcohol addiction is considered as the failure to stop misusing alcohol despite increasing negative results or consequences. The guidelines further indicate the unstoppable cravings for alcohol, escalating limits when drinking, and an ongoing use of alcohol regardless of emotional, psychological, physical, and social negative consequences. This incapacity to quit misusing alcohol and the onset of these behaviours clearly show that alcohol addiction has developed (George et al., 2012).

Additionally, increased tolerance and withdrawal issues mostly occur when one is already addicted, meaning that the misuser craves for more alcohol to achieve the same effect and when not consuming alcohol the misuser experiences withdrawal symptoms. These are characteristics that symbolise the development of alcohol dependence or alcoholism (Edwards, 1990).

2.3.5 Alcohol dependence

According to Ellis et al. (2012), and Edwards (1990), alcohol dependence, also called alcoholism, refers to a "compulsive craving and reliance that can develop in those people or individuals whose makeup leads them to strive for and discover a getaway in liquor or alcohol." In simple terms, numerous researchers highlighted this phase as

the most serious form of alcohol misuse as it describes a strong, often unstoppable desire to consume alcohol. Thus, according to researchers, to be dependent on alcohol means that a person should be physically and psychologically dependent on alcohol while also showing a tolerance to alcohol and symptoms of withdrawal when not consuming alcohol (Edwards, 1990).

This could be a very stressful phase as normally, when a misuser quits or cuts consuming alcohol drastically, the withdrawal symptoms become threatening to those around the misuser. So, in theory these resulting symptoms can range from mild-anxiety and shakiness to serious seizures that can continue for weeks. Usually medical intervention is needed to assist people dealing with withdrawal symptoms (George et al., 2012).

Both alcohol addiction and alcohol dependence can be regarded as Alcohol Use Disorders (AUD). In the next section the classification of drugs will be presented.

2.4 CLASSIFICATION OF DRUGS

Table 2.1 presents the different classification of drugs. Although there are different ways of classifying drugs, the researcher found this specific classification useful. It is important to understand the different types of drugs, even though this study focuses on alcohol misuse, as some alcohol misusers could also revert to other types of drugs. As can be seen by the classification, alcohol is a depressant and therefore some people might want to use other drugs as an attempt to alleviate depressive feelings.

Table 2.1: Classification of drugs

	Common drugs	Main routes of administration	Major acute effects	Major chronic effects	Overdose	Tolerance
CNS Depressants	alcohol, sleeping aids	drinking, ingesting pills	relaxation, distribution, reduction of anxiety	damage to every organ system	common with alcohol	develops rapidly, cross tolerance occurs
CNS Stimulants	cocaine, caffeine, nicotine	smoking, injecting, snorting, drinking	alertness, mood elevation, increase in blood pressure	health damage, addiction, depression	tremors, sweating, anxiety, insomnia	rapid tolerance and stimulating effects
Opioids	heroin, morphine, metha-done, pain pills	swallowing pills, injecting, snorting	sedation, pain relief	addiction, complication in lifestyle	depressed central nervous system functioning, death can occur	rapid tolerance to pleasurable effects
Hallucinogens	LSD, Magic mushroom PCP	ingesting or smoking	alters perception of sensory stimuli, panic attack	flashbacks	agitation, confusion, aggression	tolerance to hallucinogenic properties
Cannabis	Marijuana	smoking or injection	enhanced touch, taste, smell, relaxation, increased appetite	adverse effect on lung functioning, decreased testosterone, suppression of immune system	overdose does not occur, panic attacks	tolerance to normal effects occurs

	Common drugs	Main routes of administration	Major acute effects	Major chronic effects	Overdose	Tolerance
Inhalants	Solvents, aerosol sprays, amyl nitrate	inhaling	reduced inhibition, dizziness, slurred speech	liver damage, kidneys, brain, lungs	hallucinations, muscle spasms, coma	tolerance to nitrous oxide
Anabolic Steroids	Depo-testosterone, Dano-crine, Halo-testin	ingested or injected	increased muscle strength, body mass aggressiveness	jaundice, liver tumours, mood swings	increased use results in chronic problems	no tolerance

Source: Fisher & Harrison, 2013

2.4.1 Depressants

The first kind of psychoactive drug listed by Fisher and Harrison (2013) is known as depressants. This kind of drug sedates the user, meaning it slows down the functioning of the central nervous system. Depressants make a person feel less anxious and increase drowsiness. It also causes slurred speech, reduced concentration and reduced reflexes, and may even result in life-threatening respiratory depression and unconsciousness. As a depressant alcohol is best described by the Global Status Report on Alcohol Abuse (2018) to be the major global risk factor associated with health problems such as alcohol dependence, liver cirrhosis, cancers, and road accidents due to driving under the influence of alcohol (Global Status Report on Alcohol Abuse, 2018). It has been argued that alcohol is one of the substances that has long-term biological and social consequences.

2.4.2 Stimulants

On the opposite side of depressants is another drug classification called stimulants. This is a psychoactive kind of drug that stimulates the activity of the central nervous system. It has been discovered that people who are using stimulants have a high risk of suffering heart attacks, as stimulants increase heart rate, mental alertness, and blood pressure, as well as insomnia. Stimulants cause a user to become very excited that may lead to possible irritability, panic, and paranoia with over-excitement. Examples of stimulants as illustrated in Table 2.1 include, amphetamine, cocaine, nicotine (Fisher & Harrison, 2013).

2.4.3 Opioids

Another drug classification is that of opioids or narcotics. This class includes opium, codeine, morphine, and heroin. These are either naturally occurring or synthetic drugs that are often used to relieve pain and coughs, they are also good in inducing sleep and relieving anxiety (Lewis et al., 2011). Because these drugs are such excellent painkillers, they are seen as the most dependence-producing drugs in society.

Side effects of these drugs are confusion, fatigue, constipation, and nausea. Misuse of opioids could lead to comas or even death (Fisher & Harrison, 2013).

2.4.4 Hallucinogens

Another class of psychoactive drug is hallucinogens. Hallucinogens are known for distorting reality. Examples of these drugs are LSD (acid), psilocybin (magic mushrooms), PCP (angel dust), and mescaline (or peyote) (Fisher & Harrison, 2013). Fisher and Harrison (2013) state that hallucinogens occur naturally and have been used for thousands of years and that some of these drugs are currently still being used as sacraments for religious ceremonies. Hallucinogens are dangerous when used improperly as they may lead to illusions and hallucinations, poor perception of time and distance, panic, paranoia, drowsiness, hyperactivity, confusion, inability to concentrate, loss of memory, and insensitivity to pain and anxiety.

2.4.5 Cannabis

Cannabis, marijuana, and hashish are drugs that have some mild impacts ordinarily ascribed to both stimulants and depressants.

Marijuana is undoubtedly the most famous and most used substance in the world. Scholars report that it first became popular in the United States in the 1920s where after it was adopted by other countries, such as South Africa. Until 1960 marijuana was relatively uncommon. However, after the "hippie" counterculture rediscovered marijuana in the 1960s, demand for, and use of the substance grew until about 1978 when the favourable attitude toward the substance reached a peak. Since then, public attitudes vary greatly from complete intolerance to ideas of legalisation. Today, marijuana remains common because of its medical uses (CESAR, 2019).

According to several researchers (Dada et al., 2018; Carelse, 2018; Lewis et al., 2011) the dangers of smoking marijuana lies in the possibility that it could be laced with other, risky substances such as cocaine, crack, Phencyclidine (PCP), or even embalming fluid. Dealers have been known to promote joints, blunts, or cigarettes dipped in embalming fluid and laced with PCP. Though reviews of laced marijuana are infrequent, and most lacing of marijuana is accomplished at user-level, it is important to consider that with unregulated drugs such as marijuana, the user has no way of understanding exactly what sort of substance has been bought (CESAR, 2019).

Marijuana's major chronic effects include the adverse effect on lung function, decrease of testosterone, and suppression of the immune system, whilst major acute effects are relaxation, increased appetite, and enhanced taste, touch and smell (Fisher & Harrison, 2013).

2.4.6 Inhalants

Inhalants are also known as volatile substances or solvents. This class includes a group of volatile chemicals with effects that are largely related to "anoxia" or "hypoxia" (Lewis et al., 2011). Examples of inhalants are gasoline, nail polish remover, airplane glue, and paint thinner. Substance researchers such as Fisher and Harrison (2013) argue that since these substances can be purchased legally and are accessible at home, they are mostly used by youths. Inhalants' major effects include the reduction of inhibition which produces euphoria, dizziness, slurred speech, etc. Overdosing may result in headaches, irregular heartbeat, and even coma from lack of oxygen (Fisher & Harrison, 2013).

2.4.7 Anabolic

Steroids can be administered through injection directly into the bloodstream (intravenously) or into the muscle (intramuscularly). There are also drugs or gel tabs that can be taken orally, or lotions that can be rubbed directly onto the users' skin. These substances can be taken in a single course or through a complicated pattern such as pyramiding, cycling, or stacking. With each of these methods, the ingested dose can vary from ten to a hundred instances greater than those prescribed for scientific conditions (Fisher & Harrison, 2013).

Steroid hormones work by stimulating positive components of a muscle cell such as an increase in the development of proteins, one of the many chemical compounds that are associated with increasing muscle mass. In terms of physical effects, there are two major ways that steroids can affect a person's body. Steroids can have androgenic results, including masculinising effects like the deepening of the voice, increasing of facial hair, and initial enlargement of some male sex glands. Steroids can also have anabolic results including an increase in muscle mass, the size of some internal organs, and calcium in the bones. Overall, the technique by which steroids work on the body can be multifaceted (Lewis et al., 2011).

2.5 AN OVERVIEW OF SUBSTANCE MISUSE

Substance misuse causes harm to individuals, families, and the wider community. Buddy, Richard and Forgoros (2018) also refer to the pattern of harmful use. According to the World Health Organisation (WHO) (2014) substance abuse is a worldwide issue and as such most countries suffer from this phenomenon as it usually involves legal and illegal drugs that are potentially lethal.

The question that arise is this: when do substance use become physically dangerous? The answer depends on a variety of factors such as the individual, the type of substance, the way it is taken, and the amount taken. Even though not everyone misusing substances will become addicted, negative outcomes such as health issues, social issues, and sexual risky behaviour are usually present (Buddy, Richard & Forgoros, 2018).

Substance misuse has been part of the human race for thousands of years and for different reasons such as family, spiritual, and entertainment rituals. Worldwide, substance misuse still remains a huge challenge and in South Africa it is just one of many problems that must be addressed (Ellis et al., 2012).

In most countries the misuse of substances is very problematic as this negative behaviour leads to very complex destructive consequences (Buddy et al., 2018). Jacobs (2018) also indicates a strong correlation between substance misuse and crime.

According to the WHO (2019) 275 million people (nearly 6 percent of the global population) aged between 15 and 64 years used drugs at least once during 2016. Of these, 30 million people who use drugs also suffer from a Substance Use Disorder (SUD) that requires treatment. In 2016 approximately 450 000 people died as a result of substance misuse. It is also estimated that 35 million people have a SUD (this also includes AUD). Despite these alarming statistics, globally only one in seven people with a SUD would receive treatment. According to the United Nations Office on Drugs and Crime (UNODC, 2014) in Africa only one in 18 people have access to treatment. It is no wonder that the misuse of substances is often referred to as the “World Drug Problem” (WHO, 2019).

Substance misuse also have a negative influence on the wellbeing of people. Regarding the physical health, people who misuse substances often experience kidney and liver failure, diabetes, as well as diseases associated with the heart and lungs. Then there are accidental injuries and homicides associated with substance misuse. Overdosing could also result in death (Carelse, 2018). From the abovementioned discussion substance misuse poses a huge threat to the wellbeing of people and communities. Specifically, the misuse of alcohol occurs worldwide, and in South Africa there are additional reasons that contributed to this habit. The history of alcohol misuse in South Africa will be discussed next.

2.6 THE HISTORY OF ALCOHOL MISUSE IN SOUTH AFRICA

The Global Status Report on Alcohol (WHO, 2018) and researchers such as Moss (2013) and the WHO (2019) argue that alcohol is one of society's oldest intoxicants with archaeological evidence of use in China, and Egypt dating back thousands of years.

Dietler's (2006) reviews on the history of alcohol indicate that alcohol has existed in many countries worldwide and for various reasons. For example, Moss (2013) indicates that alcohol has been utilised in religious functions, devoured as a social "lubricant", used to celebrate victories, and to alleviate the pains of defeat and loss.

Statistically, among the 54 countries on the African continent, 10 are experiencing substantial alcohol consumption issues. These countries include Tanzania at number 10 where 11 percent of alcohol consumption comes from beer and 87 percent from other types of alcohol; Botswana at number 9 with 57 percent of the population that use beer and 42 percent use alcohol from other categories such as wine; and Gabon at number 7 where 68 percent of people consume beer. South Africa appears in the 6th place and fall under this category with 56 percent of beer consumption and 44 percent that comes from wine, spirits, and other types of alcohol.

In South Africa the most popular beer brands are Castle and Black Label but the country's extensive vineyards, particularly in the Western Cape, produce some of the world's most popular wines. According to Plaztky, Patel and Erfort (2017) the Western

Cape Province appears to be one of the provinces in South Africa that has the highest rate of alcohol misuse.

Bhardwaj (2016) states that compared to other countries South Africa does not have the highest alcohol consumption. South African alcohol statistics indicates the country ranked 30th out of 195 countries worldwide. This is still very high and on a scale from one (being the least unsafe) to five (being the most unsafe), South Africa is rated on a four regarding harmful drinking (Bhardwaj, 2016).

Historically, before the colonial era, alcohol consumption in South Africa was limited to social and religious use by indigenous people. The Dutch and British settlers introduced social drinking to the country and later used alcohol as a means of payment for poor farm labourers. In the end, alcohol was used as a strategy for controlling certain parts of the population. The matter on alcoholism was contemplated as a “dark secret” during the apartheid regime. However, since 1994 the problems associated with alcoholism started to receive consideration on national government level (Sinha, 2013).

The Alcohol National Experiences (2005) concurs that the arrival of alcohol in South Africa has played a central role in people’s lives. Ideas drawn from the South African Alcohol Policy (2014) highlighted Jacobs and Jacobs’ findings after they studied the narratives on alcohol dependence in South African families during the post-apartheid era. According to these authors, the “dop” system that were enforced amongst the black and coloured people living in farming communities were viewed as a condition of service. The “dop” system used alcohol to pay farm workers for their labour and in today’s modern times it is evident that the “dop” system has had dire consequences for the South African society.

Even though it has been years since the “dop” system was banished, alcohol dependency among farm workers continues to play a major role in trapping farm workers in a cycle of poverty and dependence (Botes, 2014; Ellis et al., 2012). Its impact on the health and development amongst rural farming communities are well known. Key to these impacts are alcohol-related trauma, exceptionally high rates of TB, child and adult malnutrition, and Foetal Alcohol Spectrum Disorder (FASD) – a condition resulting from maternal alcohol abuse during pregnancy. It is one of the

leading causes of preventable birth defects and developmental disabilities amongst children. Children suffering from FASD are known to present a combination of abnormal facial features, growth retardation, and central nervous system (CNS) abnormalities. In addition, social problems associated with alcohol, including child abuse, violence against women, and family disruption are major obstacles to health and social services, specifically on farms (Botes, 2014).

Since the promulgation of the National Liquors' Act No. 59 of 2003, there has been a wide-ranging debate about alcohol misuse. However, a significant number of South African researchers (Carelse, 2018; Jacobs, 2018; Pasche & Myers, 2012) agree that alcohol misuse pose a major threat to the wellbeing of individuals, families, and communities.

It is especially in poorer communities (where there are usually a lack of sufficient resources) that the excessive use of alcohol often threatens the safety of vulnerable groups such as women and children.

The Health and Social Care Information Centre (2014) reported that in South Africa between 2012 and 2013, there was a total of 1 008 850 admissions to hospitals where an alcohol-related disease, injury, or condition was either the primary cause for admittance or a secondary diagnosis. It is thus clear that South Africa, as other developing countries, face severe alcohol-related challenges.

2.7 FACTORS THAT CONTRIBUTE TO ALCOHOL MISUSE

There are several factors that could contribute to alcohol misuse such as family history, psychological factors (e.g., anxiety or depression), the addictive pharmacology of alcohol, and the environment in which people live. The genetic disposition of some people also plays a role.

For some who consume alcohol above the guidelines, at hazardous and harmful levels, alcohol misuse may be due to habit, lifestyle, lack of awareness of the health effects, and an absence of obvious symptoms (Ilomaki, Paljarvi, Korhonen, Enlund, Alderman & Kauhanen 2008; Bell and Dennis, 2013). Although several factors could contribute to alcohol misuse, for the purposes of this study the following factors will be discussed;

family history, experience of stress, environmental factors, social factors, and the lack of supervision and age of first use.

2.7.1 Family history

A recent report, the Global Status Report on Alcohol and Health (2018) on the causes or factors of alcohol misuse, indicates that most researchers and clinicians identified that the misuse of alcohol cannot be contributed to a single cause but rather to various 'risk factors' that can result in the development of alcoholism. One of the risk factors mentioned is that of a family history of alcohol misuse. According to the report (2018), if one of the family members has been diagnosed with a substance use disorder (SUD) it would increase the chance that another family member will also in future be diagnosed with the same disorder or any type of substance use disorder. The research on family history further shows that the closer the family relation the greater the chances.

For instance, a first-degree family relative such as a parent or sibling who has been diagnosed with an alcohol use disorder (AUD) is a more salient risk factor compared to a distant relative. The report indicates that a family history with risk factors of alcohol disorder often designates the presence of a genetic tendency to some disorders, as is the case with mental health disorders. There is no genetic single factor that causes AUD, but rather a combination of factors (Global Status Report on Alcohol and Health 2018).

However, a psychological study done by Schuckit (2002) on genetic factors as contributors to alcohol misuse, shows that genes have an influence on the risk of alcohol misuse and dependence. For instance, a study done on "family, twins, and adoption" offers evidence that genetic factors contribute to the risk of severe and repetitive alcohol-related life issues.

2.7.2 The experience of stress

Sihna (2013) defines stress as the process that includes perception, appraisal, and response to harmful and/or challenging events. According to him, experiences of stress can be either emotionally or physiologically challenging as a response to the regaining

of homeostasis. Based on these facts, it has been argued that regular and binge use of most substances both serve as 'pharmacological' stressors (Sinha, 2013).

The Alcohol Report (2018) indicates that traumatic experiences, stress, or depression are other factors that are more likely to increase the chances to misuse substances like alcohol, leading to the development of substance use disorders. Numerous researchers for risk factors that contribute to alcohol misuse have noted that any type of traumatic or stress-related situation appears to be one of the leading risk factors of alcohol misuse in South Africa, particularly, in single-parent families (Yang, Tao, Wang & Zhang, 2018; Rehm, 2011). It has been argued that raising children alone becomes a burden since it is the single parent's responsibility to ensure that everything in the house is in order. The problem becomes worse if there is a financial crisis. It is with situations like these that the single parent then becomes stressed and/or experiences the situation as trauma.

However, research (Sinha, 2013) shows that certain types of experiences cannot always be associated with the cause or factor contributing to alcohol misuse. Those experiences include physical or sexual abuse, loss of a family member or a parent, or divorce, but being a victim of, for instance, domestic violence, and emotional abuse can lead to negative influences.

Apart from the abovementioned contributing factors to alcohol misuse within single-parent families, alcohol misuse researchers also looked closely at working conditions that most people are exposed to, such as long hours and strenuous jobs, as these factors are also likely to increase high levels of stress which then cause people to consume alcohol with the intention of releasing stress but that could then easily lead to alcohol misuse.

It is noted that in general people should find other ways to de-stress to prevent the misuse of alcohol (Guidelines on the alcohol rehab guide, 2019).

2.7.3 Environmental factors

In modern society, studies on alcohol have extensively explored a possible relationship between the environment and risk factors of alcohol misuse (Macionis & Plummer, 2012). Researchers such as Du and Wam (2009) have measured that a person's

proximity to alcohol retail or liquor stores influences chances of alcoholism. The same principle would apply if one lives or works close to taverns and alcohol-selling establishments, and in areas where there is a more positive outlook on the consumption of alcohol.

In general, the media and alcohol manufacturers also play a major role in bombarding society with attractive advertisements, especially to young adults. Almost all advertisements, whether on television, radio, social media, or posters, show drinking alcohol as something that is accepted, fun, and relaxing (Stautz, Frings, Albery, Moss & Marteau, 2017). For example, the United States Alcohol Report of 2011 indicated that there was an increase of more than 400 percent in alcohol advertisements during the last 40 years.

In addition, it is argued that affordability also contributes to the misuse of alcohol. For instance, it is a popular belief that individuals who come from wealthy families are more likely to use alcohol compared to those living under poor conditions (poverty). As a result, and according to Gallup's current drinking habits, research shows that 78 percent of people with an annual household income of \$75 000 or more, misuse alcohol as compared to less than 45 percent of individuals who have an annual income of less than \$30 000 in the United State of America (Gallup, 2009).

2.7.4 Social factors

The nature of alcohol consumption and its influence in the world showed the significance of understanding major determinants of heavy alcohol consumption globally and locally. Research done on social factors that contribute to the misuse of alcohol have indicated a strong relationship between alcohol misuse and social factors such as culture, religion, family history, and work influence (Murphy, Roberts, Stickley & McKee, 2012).

Despite the abovementioned attributes contributing to alcohol misuse, a research done on college students by Du and Wan (2009) indicates that starting college or a new job can also make someone more susceptible to alcoholism. During these times persons are looking to make new friends and develop relationships with peers. The desire to fit in and be well-liked may cause people to participate in activities that they normally would not partake in. Before they know it, they might be heading to every college or

company happy hour, drinking more frequently and even craving alcohol after a long day – all warning signs of Alcohol Use Disorders (AUD).

The environment in which someone resides also plays a role in alcoholism. In some countries and states it is significantly harder and more expensive to acquire alcohol. With less access, it is less likely that an individual develops alcoholism. In general, the more pervasive the presence of alcohol in an environment, the more likely an individual is to develop alcoholism.

Family wealth also plays a role. Individuals with greater family wealth are considerably more likely to heavily consume alcohol and develop alcohol use disorders. In the United States, 78 percent of individuals with an annual household income of \$75 000 consume alcohol, while only 45 percent of individuals with an annual household income of less than \$30 000 consume alcohol (Du & Wan, 2009).

2.7.5 Lack of supervision and age of first use

According to Buchmann et al. (2009) early inception of alcohol misuse or profoundly hazard elements can contribute to the development of alcohol-related issues at a later stage, despite the fact that certain fundamental issues underlying this correlation remain vague. However, a direct causal relationship between early-age consumption of alcohol and the vulnerability to a subsequent alcohol use problem, has been suggested.

Adolescents are in a phase of life that is associated with various significant transitions and psychological changes. This is also the time that adolescents usually develop a strong desire to fit in with their peers and be accepted by them. These are just a few reasons why young people often start consuming alcohol.

Various scholars argue that when young people start using alcohol early it may influence important developmental processes that could later have a negative effect on young people's healthy functioning. Early use of alcohol may also increase young people's chances of misusing alcohol at a later stage (Buchmann, Blomeyer, Jennen-Steinmetz, Schmidt, Esser, Banaschewski & Laucht, 2009).

2.8 SOUTH AFRICAN LEGISLATION ON ALCOHOL MISUSE

The Global Status Report on Alcohol (2014) demonstrates the significant need for alcohol policies and programmes aimed at reducing alcohol consumption. These policies and programmes should specifically address issues concerning training and data, network activity, driving while affected by alcohol, accessibility, showcasing, evaluating, and unlawfully and casually produced alcohol.

As noted by Anderson, Chisholm, and Fuhr (2009), systematic reviews and meta-analyses that policies regulating the environment in which alcohol is marketed (particularly its fee and availability) are effective in lowering alcohol-related harm. The importance of enforcing legislative measures to minimise drink-driving and personally directed interventions to at-risk drinkers are also effective (Global Status report on alcohol misuse, 2018).

Therefore, it is of utmost importance to understand the laws and policies in striving to reduce the harm caused by alcohol consumption and abuse both globally and locally. Parliamentary committees have the potential to play an important role in the drug policy-making process, holding a government to account and scrutinising policy. To assess their current effectiveness, this section reviews how they have obtained and used evidence and whether their recommendations have been acted upon. The South African legislation on alcohol misuse is confusing and it is unclear what the legislation is doing or proposing to do about the rate of alcohol consumption by South Africans.

Nearly everything in this world is guided by laws, without legislation the world would be unmanageable. Laws are necessary to attain order. They exist in different places, such as homes, schools, churches, and marriages. In the following section the policy and legislation on alcohol abuse in South Africa is discussed.

2.8.1 National Drug Master Plan 2013-2017

The harmful use of alcohol and drugs exposes not only the users but also the non-users to injury and even death due to people driving whilst under the influence of alcohol and drugs, and because of violent crimes associated with misuse of alcohol and drugs (RSA, 2013). Research further shows that socially, the families of addicts

are placed under significant financial pressures due to expenses related to burglary or theft within the family (National Drug Master Plan 2013-2017, 2013).

In an effort to address the wide-ranging effects of misuse of alcohol and drugs, the National Drug Master Plan 2006-2011 was reviewed and the National Drug Master Plan for 2013-2017 of South Africa was then formulated by the Central Drug Authority in terms of the Prevention and Treatment of Drug Dependency Act 20 of 1992. Act 20 of 1992 was eventually replaced by the Prevention of and Treatment for Substance Abuse Act (70 of 2008), as revised, and approved by Parliament to meet the requirements of the international bodies concerned and at the same time the specific needs of South African communities (RSA, 2013).

Concerning the efficiency of the Drug Master Plan, Geyer and Lombard (2014) wondered whether there were going to be any positive changes in the consumption of alcohol and drugs since the development and monitoring in terms of the NDMP of 2006 and the NDMP of 2013.

Recently an evaluation done by the NDMP 2013-2017 was made to identify drug use trends in South Africa. The resultant data revealed that the nature of the problem is still similar to what it was when the NDMP 2013-2017 was drawn up. Youth behaviour has not changed significantly, although there are some minor drops in use patterns (Reddy, 2013).

Researchers such as Geyer and Lombard (2014) enlightened that the NDMP 2013-2017 requires that the Department of Social Development plays a leading role in coordinating services across all government spheres. Currently the NDMP 2013-2017 is the single national administrative system that guides both government and civil society towards community-oriented endeavours in battling substance misuse (NDMP 2013-2017, 2017). However, the NDMP's intervention efforts in battling substance misuse has been disconnected and, in this manner, is ineffective.

To free our networks of substance misuse it is critical to have engaged and incorporated interventions to reduce interest in and supply of substances and to increase rehabilitation. To accomplish this a multi-sectoral approach across three circles of government is important (Geyer & Lombard, 2014).

Looking at one of the policies established by the New Zealand Government, namely the National Drug Policy (2012), it can be seen that this policy provides clear, detailed guidelines within the policy framework for local government, non-government agencies, and organisations that are part of the drug and alcohol sector who then developed their respective programs and set priorities around the principle of “harm minimisation” (New Zealand National Drug Policy 2007-2012).

In addition, the update of the New Zealand National Drug Policy (2007-2017) was built on an existing method (the three pillars) adopted by the New Zealand Government, namely, reducing demand, helping people with drug and alcohol problems, and controlling drug supply.

Significantly, this New Zealand National Drug Policy allows for larger support to be given to the families and communities of those who misuse drugs as well as for children affected by alcohol and drugs living in households. Indeed, the latest review of this National Drug Policy shows a positive result since the policy was amended within the greater New Zealand society (National Drug Policy, 2007-2017).

2.8.2 South African Alcohol Policy

South African policy on alcohol as governed by the National Liquor Authority (NLA) focuses on four main objectives. This policy aims to ensure that liquor legislation and practices in South Africa are harmonised to facilitate effective enforcement of liquor laws by various enforcement authorities, to ensure consistency in the application of liquor laws throughout the country, and to reduce the socio-economic and other costs of alcohol abuse by reducing access to and the availability of liquor (Parry, 2010).

The Liquor Policy is among South Africa’s most imperative systems as it implements measures by government to control free market activity, to limit liquor related harm, and to advance general wellbeing. The Liquor Policy also have different components impacting utilisation and harm of alcohol, for instance, the level of production of alcoholic products, promotion of alcohol products, and socioeconomics around alcohol, which are for the most part outside of government control. In a simple way it is hoped that if liquor production and advertisement is controlled it would influence and limit the use of liquor and drinking propensities and so have a positive effect on social and health issues related to the misuse of alcohol (Parry, 2010).

The current South African Policy (2009) initially proposed four aspects in controlling alcohol consumption as well as alcohol-related harm. These aspects are to restrict alcohol advertising and counter-advertising, to regulate retail alcohol sales, to control alcohol packaging, and to increase alcohol taxation.

A critical review of this policy however, highlighted that these aims could not be implemented. For instance, under the restriction of alcohol advertising there has been a delay of almost 12 years due to political decisions that affected changes to the alcohol labeling industry.

The same issue applies to the regulation of retail alcohol sales as the review indicates the inability of the SA Government to incorporate unlicensed outlets into the formal market and mediate among those in order to measure the regulatory policy (Parry, 2010). Arguably, the changing in licensing laws would then mean that alcohol is being sold in more places and for longer hours which shows no development in combating the problem.

2.8.3 White Paper on Families

After the first democratic government of South Africa came into office in 1994, the Department of Social Development released the first draft of the White Paper on Families in South Africa in 2012 which was then launched in 2013 (Rabe, 2017). A white paper is defined by Charles (2013) as:

[Is] a type of policy document that often leads to the development of national law, although this is not always the case? A white paper is preceded by a green paper – a draft policy document prepared by the government for public consultation with interested parties and civil society organizations.

However, the White Paper on Families mainly focuses on promoting family life and strengthening families of South Africa (RSA, 2013). There should be a relationship between the state and people on the ground (society), in terms of supporting and strengthening vulnerable families in South Africa (Rabe, 2017). According to the policy, on the off chance that family members fail to take adequate responsibility for individual members, different institutions should indirectly become actively involved. Interestingly, the review of the White Paper on Families (RSA, 2013) indicates that

South Africa is one of few countries in the Southern Hemisphere that has a family policy. It appears that most policies and social development programmes in other countries are those that exist to support, promote, or strengthen families especially those with children (Rostgaard & Eydal, 2018). Therefore, they state that South Africa is one of the few countries that has adopted a family policy over and above a range of other social policies that benefit families directly and/or indirectly.

With reference to the White Paper on Families (RSA, 2013) it has to be asked whether the policy includes all kinds of families, i.e. nuclear families, single-parent families, same-sex couple families. This issue is reflected in Rabe's views on the review of the White Paper on Families which shows that much criticism is devoted to the concept of the nuclear family as a central reference point of the policy and that this is what defines the White Paper on Families (Rabe, 2017).

According to Rabe (2017), despite the principles of the White Paper on Families (RSA, 2013) these are mostly imported and imposed notions that do not correspond with the reality of the majority of South African families that are largely made up of extended and multi-general families (Rabe, 2017, Knijn & Patel, 2018). In addition, by privileging a family form as being central to family and societal stability, the White Paper on Families also fails to recognise same-sex couples or families and non-conforming gender identities (Charles, 2013).

For this reason, it can be said that single-parent families are being excluded in the policy definition. Unlike, the Integrated Service Delivery Model (ISDM) that includes vulnerable, single-parent, child-headed, destitute and refugee families as its target groups in terms of service delivery (RSA, 2018).

The review of the White Paper on Families (2018) again confirms that the apartheid discriminatory policies also contributed to the rapid change of the family structure and function due to its exploitation of migrant labour, and its erosion of rural life. From this point of view, it is clear that single-parent families existed even during the apartheid regime. It can be said that many factors must be taken into consideration with the implementation of the White Paper on Families to ensure that all types of families in South Africa are included.

2.8.4 The Prevention of and Treatment for Substance Abuse Act (70 of 2008)

The Prevention of and Treatment for Substance Abuse Act, No. 70 of 2008 aims to

provide for a comprehensive national response for the combating of substance abuse; to provide for mechanisms aimed at demand and harm reduction in relation to substance abuse through prevention, early intervention, treatment and re-integration programmes. In addition, its purpose is to provide for the registration and establishment of treatment centres and halfway houses; to provide for the committal of persons to and from treatment centres and for their treatment, rehabilitation and skills development in such treatment centres; to provide for the establishment of the Central Drug Authority; and to provide for matters connected therewith.

Because substance abuse is one of the major social concerns globally, the South African Government has indicated that it would prioritise fighting substance abuse to ensure the wellbeing of South African families (RSA, 2013). According to the WHO (2011), substance abuse is still on the increase and as such is affecting the lives of whole societies. Based on the South African substance use statistics, alcohol consumption is getting out of control, which emphasises that a significant effort must be made through various strategies to prevent further escalation of alcohol misuse.

2.9 CONCLUSION

In this chapter the researcher presented an overview of alcohol misuse in a South African context, the factors that could contribute to substance misuse, and the relevant national policy and legislation that address substance misuse. From the discussion, it can be concluded that South Africa has sufficient legislation on alcohol misuse that could assist the South African society to understand the rules and regulations about misusing alcohol. However, a lack of knowledge or research still exists when it comes to improving the implementation of this legislation.

In the next chapter the wellbeing of single mothers affected by alcohol misuse will be discussed from an Ecological Systems Theory perspective. The Ecological Systems Theory will also be discussed in detail to get a broader understanding of the influence of single mothers' alcohol misuse on the wellbeing of their families.

CHAPTER 3:

THE WELLBEING OF SINGLE-MOTHER FAMILIES AFFECTED BY ALCOHOL MISUSE ACCORDING TO THE ECOLOGICAL SYSTEMS THEORY

3.1 INTRODUCTION

There is still not enough known about the relationship between alcohol misuse and the wellbeing of families. This relates to the Ecological Systems Theory that postulates that human events can often lead to a “single dimension cause-and-effect relationship between social units within the environment”. Based on this it can be said that poor family wellbeing can be due to the misuse of alcohol.

In recent decades there has been a debate on family wellbeing and understanding the family's roots. It is essential to look at how wellbeing has been interpreted by different authors. On the one hand scholars such as Armstrong, Birnie-Lefcovitch and Ungar (2005) refer to family wellbeing as “quality of life” and define it as how well one feels his or her important needs, goals, and wishes, are being satisfied. However, this interpretation makes it very problematic as it suggests that the meaning and interpretation of family wellbeing depends on the quality of life.

On the other hand, Dodge, Daly, Huyton, and Sanders (2012) proposed a new way of understanding wellbeing by agreeing that one should look at how people cope with change and how their levels of wellbeing are affected during that particular situation. According to Bronfenbrenner (1992) systems or levels of relationships affect other systems or relationships that form part of the environment. Both Bronfenbrenner and Von Bertalanffy (1968) emphasise a cause and effect relationship, and within the principles of the Ecological Systems Theory the aim of this chapter is to describe the family wellbeing affected by alcohol misuse of single mothers as the misuse of alcohol of a mother in a single-mother family may have disastrous effects on the lives of children or other family members.

Consequently, in this chapter the wellbeing of a single mother's family affected by alcohol misuse will be described as compared to a family where there are no alcohol

issues. The second objective of this study will also be addressed, namely, to describe the family wellbeing as affected by the misuse of alcohol of single mothers from the perspective of the Ecological Systems Theory.

3.2 THE ECOLOGICAL SYSTEMS THEORY

According to Macionis and Plummer (2012) both the Ecological Systems Theory and the Role Theory are vital for people to act out their most effective daily activities to fulfil their goals. In order to understand how the wellbeing of single mothers' families are affected by the alcohol misuse of a mother, the children and their mother (single parent) must be considered given that they exist in the larger context of society as whole. Therefore, for the purpose of this chapter, children are viewed as a micro system affected by the misuse of alcohol by their mother which influences the whole family structure and everyone's internal and external relations (Bronfenbrenner, 1992). Single mothers are thus central to this understanding as the effect of supportive relationships and alcohol misuse is ultimately understood as the 'cause' and 'effect'.

The core function of the Ecological Systems Theory is the existence of interconnected transactional networks (Macionis & Plummer, 2012). Within this approach the ecosystem perspective has similar functions to the Ecological Systems Theory of Urie Bronfenbrenner (1992) since the ecosystem perspective has been almost universally accepted in social work, and as it provides a framework for thinking about and understanding these networks in their complexity. According to Urie Bronfenbrenner (1992), Ecological Systems Theory refers to a child's development within the context of the system of relationships that forms his or her environment. Therefore, this theory will be used as framework to study the wellbeing of single mothers' families affected by alcohol misuse.

3.3 THE ORIGIN OF THE ECOLOGICAL SYSTEMS THEORY

Originating in the biological sciences (Bronfenbrenner, 1979), the Ecological Systems Theory seeks to understand human behaviour and its outcomes within the context of social and physical environments. The theory mainly focuses on two major aspects, firstly it emphasises the interaction between an individual and his or her environment as this individual endeavour to adjust and fit into established systems (Gitterman &

Salmon, 2009). Secondly, the theory focuses on the interdependence of different levels of an ecological system (Booth & Anthony, 2015).

For purposes of this study four levels of the ecological systems theory will be discussed, namely, the microsystem (family, close friends), nested within the mesosystem (neighbourhoods, communities, government structures), that is situated within the exosystem (school, church, social networks and so forth) which is encased within the macrosystem (cultural ideas, beliefs, histories, traditions) (Bronfenbrenner, 1979). The Ecological Systems Theory essentially postulates that individuals are influenced by all levels of their ecological system, for instance family, community, culture and church, and for an individual to fully function a balance between these systems must be achieved. Within this theory, individuals are conceptualised as dynamic actors, constantly adapting to a changing environment to maintain equilibrium between needs and resources (Booth & Anthony, 2015). Berben, Dobbels, Engberg, Hill and De Geest (2012) agree with Booth and Anthony's study of human relationships and a person's development as they point out that a person's development is affected by everything in that person's immediate environment. These researchers thus support Bronfenbrenner's belief that the development of people is affected by everything in their surrounding environment.

The advocates of the Ecological Systems Theory argue that when faced with a stressor, an individual must assess the stressor and then decide the best course of action for coping, or the individual must adjust to meet new demands in his or her ecological system (Booth & Anthony, 2015). Individuals cope by changing aspects of themselves, their environment, or some combination of the two, in order to improve the "fit" between themselves and their environment (Gitterman & Salmon, 2009).

Disharmony between an individual and his or her environment may occur when the individual struggles to maintain his or her safety, to establish healthy relationships, to locate adequate social supports, to establish a positive self-concept, or to obtain financial resources.

Johnson and Yanca (2010) add that when speaking about ecological perspectives, "the human need cannot be considered apart from the larger systems in which humans' function". Thus, the functioning of people has to be considered as belonging to several

larger systems that often make conflicting demands. These systems are part of everyone's environment (Johnson & Yanca, 2010). Noticeably, Geiger et al. (2016) also quote from the founder of the Ecological Systems Theory, Bronfenbrenner, and stress that this theory provides the framework for understanding human behaviour within the structures of the environment and interactions between individuals and environment occurrences. This Ecological Systems Theory provides a clear understanding of how the wellbeing and social support to families of single mothers affected by alcohol misuse are dependent on these interacting systems.

3.4 THE ECOLOGICAL SYSTEMS THEORY AND THE SINGLE-MOTHER FAMILY

According to the White Paper on Families (RSA, 2013), single-parent families are families with children under the age of 18 headed by a parent who is widowed or divorced and who has not remarried, or by a parent who has never married. The White Paper on Families (RSA, 2013) claim that more than 40 percent of all households in South Africa are headed by single-parent families, of these families, the majority are headed by women. The South African Institute of Race Relationships (IRR) discovered that only 33 percent of children live with both parents. For those in single-parent families, 39 percent of them have single mothers while only 4 percent are single-father families (Masilela, 2018).

The fact that most of the single-parent families are headed by women has important financial implications as it has been demonstrated that female-headed households (FHHs) are commonly hindered or affected in terms of accessing significant socio-economic resources such as land, good education, good health care services, and other extension services (RSA, 2013).

According to Jones, Forehand, Brody and Armistead (2003) the family serves as a major context for socialising children. One important aspect that should be taken into consideration when working with families is that the significant factor in the family context involves the family wellbeing or functioning for both parents and children (Jones et al., 2003). Within this regard, the Ecological Systems Theory is used to assess the wellbeing of families where there is a problem with alcohol misuse. Therefore, the Ecological Systems Theory has been an effective tool to assess families

for many years and in providing explanations on how families should function in especially when problems occur.

Bronfenbrenner (1979) describes the Ecological Systems Theory as a theory of human development, from the outset the developing individual is consistently viewed as influencing and being influenced by the environment. In other words, the family plays a key role in a microsystem context in which development occurs; it does so in terms of personal characteristics of all individuals in the family; and most importantly, it does so in terms of the interactions among family members as part of proximal processes, namely, the interaction between children and their guardians. What is also important is that Bronfenbrenner was intensely interested in the family as an institution (Rosa & Tudge, 2013). This means that family is regarded as a major social institution as it is a place where much of a person's social activities occur (Rosa & Tudge, 2013). The following section will focus on Bronfenbrenner's four sub-systems of the Ecological Systems Theory and how these sub-systems may influence the interaction or relationship within the family where alcohol misuse is a problem.

3.4.1 Four sub-systems of the Ecological Systems Theory

In order to understand dynamic interrelations among various personal and environmental factors, it is important to consider the entire ecological system in which growth occurs. As the main objective of this chapter is to focus on family wellbeing where alcohol is a major problem, describing the four interrelated types of environmental systems as discussed by Bronfenbrenner (1979) is important.

Figure 1 shows a diagram that provides a clear distinction between the four sub-systems of the Ecological Systems Theory. This is followed by a detailed discussion for each sub-system incorporated with the families of single mothers who are affected by the misuse of alcohol by the mother in an effort to support and guide human growth for individuals within families (Rosa & Tudge, 2013).

Figure 1 is a Nested Model of the micro-, meso-, exo-, and macrosystems in Bronfenbrenner's Ecological Systems Theory based on the example of single-mother families (Peppler, 2017).

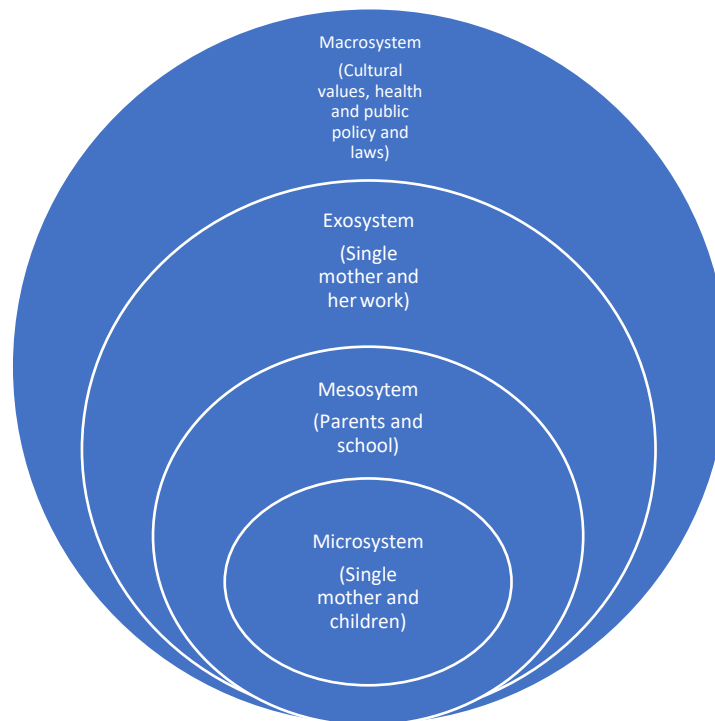


Figure 3.1: Nested model of the Ecological Systems Theory of Bronfenbrenner (1992)

3.4.1.1 *Microsystem*

The Microsystem is the most immediate ecological system that includes settings in which individuals directly interact (Ettelkal & Mahoney, 2017). Rosa and Tudge (2013) call for the physical characteristics where a person is situated, for instance, at home or with the family, at school, with peers, and in a neighbourhood etc., and in which the developing person can interact on a face-to-face basis with others. Within this scene, families where there are alcohol issues, especially of a mother, are likely to be dysfunctional and fail to interact as a result of poor relationships. For instance, the relationship between the mother and children within the family not only influences them but children in turn influence other systems in the relationship.

In simpler terms, Geiger, Piel, Lietz, and Julien-Chinn (2016) suggest that a microsystem is a pattern of activities, roles, and interpersonal relations experienced by the developing person in each setting with physical and material characteristics.

Geiger et al. (2016) also stress that individuals could both influence and be influenced by microsystems (Johnson & Yanca, 2010). Therefore, understanding single mothers'

family wellbeing on this level involves a single mother as a parent within the family and her own children or any other children that are under the same roof, her care, and friend groups.

3.4.1.2 Mesosystem

Several researchers have described the mesosystem as a system of connections or linkages between microsystems that involves the connection between children and parents or between family and social groups. According to Bronfenbrenner's idea, this type of system encompasses the interrelations among two or more settings in which the developing person actively participates, for example, child relations happen at his or her home, school and neighbourhood peer group.

The mesosystem entails bringing people together who are not as intimate as a couple or family members but might mutually build and benefit from this social or resource network. It might directly change the system that is affecting a client, such as a classroom or neighbourhood group.

For example, the mesosystem's scale work includes group therapy counselling or support groups, self-help groups and/or neighbourhood community associations (Hepworth, Rooney, Rooney & Strom-Godfrey, 2016).

As mentioned above, its relations are among the two or more microsystems in which the developing person actively participates. In other words, the mesosystem is a system of microsystems. The developmental characteristics of the mesosystem are similar to those of the microsystem, the main difference being that rather than the activities and interpersonal roles and relations occurring within a single microsystem, they occur across settings (Rosa & Tudge, 2013).

3.4.1.3 Exosystem

According to Bronfenbrenner, the exosystem consists of interactions between two or more settings, one of which does not directly affect the individual. However, the occurrence of the event within the settings indirectly influences processes within the direct settings (Hong, Lee, Grogan-Kaylor & Huang, 2011).

Therefore, this type of system as discussed by Bronfenbrenner, could be classified as the service system that includes community support services and existing resources. This may, for example, comprise Social Welfare services, the South African Police Services, churches, and even health care services. The exosystem in this study is defined as the community care system which is made up of various types of services existing in the community where links are made by social service providers that are working closely with either children or adults who are in definite need of such services. These services include physical, emotional, and mental services as well rehabilitation centres for treating the misuse of the substance (alcohol).

3.4.1.4 *Macrosystem*

The macrosystem differs fundamentally from the other levels of context, embracing all the institutional systems or cultural systems, such as economic, social, education, legal, and political systems (Rosa & Tudge, 2013; Geiger et al., 2016). According to Bronfenbrenner's view, this system shows the influence of microsystems to other ecological settings in the form of lower-order systems.

Geiger et al. (2016) highlight how the interactions on the macrosystem affect processes that occur within the microsystem. In other words, the macrosystem consists of material resources, opportunity lifestyles, customs, shared knowledge, and cultural beliefs that affect processes in the microsystem (Bronfenbrenner, 1979).

In this chapter microsystems are viewed as individuals consisting of single mother(s) and children. Mesosystems are the relationships between single mothers and children. Exosystem is defined implicitly as services available in the community and resources such as social welfare services, and other human service systems. While it is not directly analysed, the macrosystem is seen as affecting all the other systems with social, cultural, and political implications.

3.5 THE NATURE OF SINGLE-MOTHER FAMILIES AFFECTED BY ALCOHOL MISUSE OF THE MOTHER

Alcohol misuse in South Africa is one of the most devastating challenges faced by individuals, communities, and society at large. Within this scenario, the misuse of

alcohol by a single mother is particularly devastating (Gilvary, 2005). This section studies the nature of single mothers' families who are affected by alcohol misuse of a mother.

Statistics on alcohol misuse in the United Kingdom show that the misuse of alcohol in the UK affects more families than drug use (UK Statistics, 2013). For instance, the number of children exposed to their parent's harmful drug use is between 250 000 and 300 000 whereas between 780 000 and 1,3 million children are affected by parental alcohol misuse. These statistics clearly indicate that alcohol misuse damage the wellbeing of families and that the misuse has a negative impact on the ability of mothers to care for their children (Gilvary, 2005).

The misuse of alcohol of a mother also increases the risk of children developing serious emotional and social problems that might become problematic during adulthood. Children who are left unsupervised for lengthy periods or left in the care of an older person due the misuse of alcohol of a mother are just two scenarios referred to that may significantly increase the rate of children being neglected (Laslett, Mugavin, Jiang, Manton, Callinan, MacLean & Room, 2015).

Apart from the negative consequences of the misuse of alcohol by the mother on children within the single-mother families, there are also strong links between alcohol misuse and disrupted families, domestic violence, feelings of rejection of children, family conflicts, arguments, financial crisis, poor spiritual wellbeing, etc. Little has been done to support these families, even for those who have shown a willingness to change their behaviour (Laslett et al., 2015).

3.6 WELLBEING IN A BROADER CONTEXT

According to Ereaut and Whiting (2008) the first and most important way to make sense of how wellbeing behaves in contemporary discourse is to see wellbeing as a social construct. There are no uncontested biological, spiritual, social, economic, or any other kind of markers for wellbeing. The meaning of wellbeing is not fixed. It is a primary cultural judgement; it is the same as what makes a life good.

For these researchers, it is the stuff of fundamental philosophical debate. What it means at any one time depends on the weight given at that time to different philosophical traditions, world views, and systems of knowledge.

How far any one view dominates will determine how stable its meaning is, so its meaning will always be shifting, though maybe more at some time than others (Ereaut & Whiting, 2008). In order to get a broader understating of the term wellbeing and to establish to what extent it fits in the study of single-mother families, the following discussion will provide a detailed explanation.

3.6.1 Historical background to wellbeing research

Understanding the historical background to the study of wellbeing is necessary to explain the concept of wellbeing. Two approaches developed, the hedonic tradition, that emphasised constructs such as happiness, positive effect, low negative effect, and satisfaction with life (Michalos, 2014; Dodge et al., 2012); and the eudaimonic tradition that highlighted positive psychological functioning and human development (Pratt & Patel, 2013).

However, despite the differences in approach, most researchers such as, Diener and Ryan (2009), Michaelson, Abdallah, Steuer, Thompson and Marks (2009), and Sen and Angner (2010) now believe that wellbeing is a multi-dimensional construct. Subsequently, the diversity of dimensions has created a 'confusing and contradictory research base' (Pollard & Lee, 2003).

Nevertheless, family relationships play a central role in shaping an individual's wellbeing through life (Thomas, Liu & Umberson, 2017). Therefore, discussing the meaning of wellbeing in families will improve the understanding of wellbeing in a broader setting. Social scientists agree that when defining this term and due to the existing literature of various researchers with their different views, there is no universal meaning for wellbeing. An early attempt to define wellbeing was Bradburn's (1969) classic research on psychological wellbeing.

His work marked a move away from the diagnosis of psychiatric clients to the study of psychological reactions of ordinary people in their daily lives. Bradburn's discussion stemmed from his interest in how individuals coped with the daily difficulties they faced

(Dodge, Daly, Huyton & Sanders, 2012). Crowley and Kadzin (2010) preferred to use quality of life instead of wellbeing as to imply its meaning. Armstrong, Birnie-Lefcovitch and Ungar (2005) indicate the close link between wellbeing and quality of life and how these terms are often used interchangeably. They conducted a study on the pathways between social support and family wellbeing. Findings of this study correlates with the Ecological Systems Theory where several factors such as coping resources, concrete resources and economic resources play a role in the wellbeing of people's life (Armstrong et al., 2005).

Emerson and Lloyd (2016) elaborate further that there is no common agreed definition for the term wellbeing. They noted that it has been frequently interpreted subjectively with various key meanings such as life-satisfaction, happiness, and quality of life. Fave, Forgead and Dodge (2011) refer to wellbeing as multifaceted and say that this encompasses both the subjective and objective meanings. According to them objective wellbeing entails income, education, and health, including interpersonal relationships and other aspects of life.

These discussions about understanding wellbeing can be traced to the work of Deci and Ryan (2011) who researched the traditions of wellbeing. They both concluded on similar indicators as ways to measure its meaning. They are of the opinion that the domain of this term falls into two traditions namely, the hedonistic tradition which focuses on happiness and that is defined as the presence of positive affect and absence of negative affect, and the eudemonic tradition that focuses on living life in a full and a deeply satisfying way (Deci & Ryan, 2011).

For the purpose of this research and to view and understand the term wellbeing within the social work perspective it is important to study the definition of social work. Social work focuses on individual wellbeing in a social work context as well as the wellbeing of society in general with the primary mission of the social work profession to enhance human wellbeing (International Federation of Social Workers, 2014).

The global conceptualisation of the definition of wellbeing as developed by the United Nations Developed Programme (UNDP, 2011) has always been about "putting people at the centre of development by means of empowering and allowing people to realise

their potential, increasing their choices and enjoying the freedom to lead lives they value” (Gamble, 2012).

If wellbeing is viewed based on the social work perspective of Gamble, then it is important to look at how social workers can enhance human wellbeing by addressing the wellbeing of single-mother families that are affected by alcohol misuse.

With the above literature in mind, the wellbeing of single-mother families will be measured by studying the following different forms of wellbeing namely, emotional, psychological, educational, economic, and spiritual wellbeing.

3.6.1.1 *Emotional wellbeing*

According to Simpson and Murr (2014) the New Economics Foundation (NEF, 2008) separates wellbeing into personal and social wellbeing. The Foundation listed five fundamental segments of personal wellbeing namely, emotional wellbeing, living a satisfying life, vitality, resilience and self-esteem. Social wellbeing on the other hand includes supportive relationships, trust, and belonging.

These fundamental segments of personal wellbeing are seen as the building blocks of emotional wellbeing. Therefore, emotional wellbeing is often defined as the combination of a positive effect in the absence of negative effect and a general satisfaction with life (Leventhal & Brooks-Gunn, 2001). These are also the characteristics that should be present in a healthy family. It is therefore easy to see how a parent’s misuse of alcohol can affect a family’s wellbeing by influencing relationships within the family and negatively affecting the children both physically as well as emotionally.

Simpson and Murr (2014), believe that an individual’s unhappiness is more closely related to her or his physical and mental health and relationships with others, than to his or her material circumstances.

Growing up in a loving and supportive family can help you develop into an emotionally-healthy teen and adult, whereas a lack of family love or growing up in an unhealthy family environment can negatively impact your emotional wellbeing in the long term, the situation becomes even worse if there is alcohol problems especially of a parent (Waldinger & Schulz, 2016).

3.6.1.2 *Economic wellbeing*

It is well known that there is a correlation between finances and the wellbeing of the family (Taft, Hosein, Mehrizi & Roshan, 2013). Good money management and being satisfied with the family's economic status can also contribute to the family's wellbeing. Studies have shown that family tension or stress amongst family members because of financial constraints often have a negative influence on emotional and interpersonal relationships (Taft et al., 2013; Black & Lobo, 2008).

Studies on the wellbeing of families (Black & Lobo, 2008) extensively indicate that poverty creates multiple stresses such as lack of health care, crime, violence, and substance misuse. Within this context it is important to recognise that the single-mother family, where the mother is misusing alcohol, is even at a higher risk and more vulnerable to suffer from stress.

Despite the South African child support grant that is payable to children from single-parent families, there have been arguments for some form of social support and financial assistance for single mothers' families (DSD, 2018).

3.6.1.3 *Educational wellbeing*

According to Bronfenbrenner (1979) children are influenced by the ecological system, specifically the system of relationships that becomes part of their environment and that forms the microsystem (the immediate environment, e.g. family and school). Bronfenbrenner (1979) continues that positive emotional interactions and experiences between caregivers and children are crucial for the development of social and emotional wellbeing in children. Within this microsystem, it can be asked how the educational wellbeing of children would be if the person they depend on (their single mother) is also the person who is misusing alcohol?

A study conducted by Hart, Blincow and Thomas (2007) concluded that there is a correlation between the alcohol misuse of a mother and poor educational wellbeing of children. The authors highlight that children growing up in low-income families experience greater violence, family turmoil, and insecurity than their wealthier peers. This could be a contributing factor in explaining why poorer children have higher rates of emotional and behavioural problems. These children often struggle to manage

aggression, regulate anxiety, get on with other children, communicate, concentrate, and follow rules and routines; it's no surprise that they often find it difficult to succeed at school (Hart et al., 2007). According to the World Health Organisation (WHO) (2015) severe challenges could lead to the misuse of alcohol due to stressors faced by parents within their families, which directly affect the educational wellbeing of children (Hart et al., 2007).

Again, this calls for schools or the education system to come up with unique opportunities and strategies to divert the path of the most disadvantaged in the society particularly children. In this regard, Donatelle (2006) argue that "the motivation to improve quality of life within the context of one owns unique capabilities is important to achieving healthier wellbeing at large". Social service providers should thus be alert to challenges children might face in the microsystem (i.e. families) and ensure as far as possible educational wellbeing.

Psychologists define psychological wellbeing as levels of positive functioning that can include a person's connection with others and self-referent attitudes that include a sense of mastery and personal growth (Ryff, 2014). Psychological wellbeing is also viewed as lives going well. This is a combination of feeling good and functioning effectively with others. However, researchers of behavioural risks factors are of the opinion that a person would not experience psychological wellbeing when the good feeling and effective functioning is compromised by negative emotions that negatively affect someone's ability to function in daily life (Huppert, 2009).

Research furthermore shows that depressive disorders and symptoms are more likely to present among people with Alcohol Use Disorders (AUD) (Strine, Mokdad, Balluz, Gonzalez, Crider, Berry & Kroenke, 2008). Studies in the United States of America found that an AUD diagnosis and alcohol dependence often goes hand in hand amongst women (Agrawal & Lynskey, 2008). Additionally, data from a study done on alcohol and related conditions showed that women with major depressive disorder were more likely to report intense alcohol abuse issues and dependence (Agrawal & Lynskey, 2008). Another study found a correlation between women's binge drinking and high levels of depression (Strine et al., 2008).

Research also indicates that parental alcohol misuse, may negatively impact the psychological wellbeing of children. The research shows that children coming from homes where the misuse of alcohol of a parent is present, tend to be at high risk of experiencing traumatic life events (Kepple, 2015).

As a result, Neger (2018) suggests that normal development in children is best achieved when they live a healthy life in protective homes rather than in homes where they are exposed to stress or trauma over long periods. The same author also observed the close relationship between domestic violence and mental health negative outcomes.

3.6.1.4 *Spiritual wellbeing*

Spiritual wellbeing refers to a person's ability to make sense of the purpose of life through connectedness with self, others, and a belief system. Spiritual wellbeing for a family can be described as a shared belief system of hope and success that enables families to manage through difficult times. Black and Lobo (2008) claim that when faced with issues or problems, many families adopt an optimistic spiritual attitude by seeking purpose in faith. It is known that various fundamental family beliefs are often founded in religion and spirituality. However, whether spirituality is religion-based or not, families with any kind of spiritual orientation are seen to have a shared internal value system that gives family members a sense of connection with each other, with the community and society at large (Michaelson, Abdallah, Steuer, Thompson, Marks, Aked, Cordon & Potts, 2009).

Overall, this is the kind of spirituality that encourages families to stay together even when they experience issues or problems (Black & Lobo, 2008). Black and Lobo (2008) continue that spirituality and religious beliefs appear to serve as powerful protectors and are often embraced by families who, for example, are experiencing issues with alcohol misuse. The opposite is also true, that without spiritual belief the family wellbeing is usually affected negatively.

According to Michaelson et al. (2009) well-functioning family members usually interact on a daily basis with nurturance and positive reinforcement and in single-mother families it is important for the mother to positively re-enforce her children. However, this would not be the case in situations where the single mother as head of the family

is mostly under the influence of alcohol. Black and Lobo (2008) therefore suggest that spiritual support is much needed for single-mother families where the mother has an alcohol problem in order to uplift the family spiritual wellbeing.

Wiedmeyer (2013) researched the usefulness of spiritual intervention and suggests that in the social work profession, spirituality is increasingly recognised as a significant strength that can aid a client's spiritual wellbeing. Thus, where single mothers experience problems with the misuse of alcohol, spiritual intervention could be helpful to those who are interested in changing or in improving their wellbeing (Wiedmeyer, 2013).

Since spirituality is often interlinked with religion, Dwyer (2010) noted that social workers who practice spiritual intervention should link the intervention with cultural competence. This refers to the process by which "individuals and systems respond respectfully and effectively to all individuals, recognise, affirm, and value the worth of each person and their community, and also protect and preserve the dignity of each person" (NASW, 2001). It should be kept in mind that cultural competence in social work is a lifelong, ongoing process and that this process includes the importance of religion and spirituality in the lives of clients (NASW, 2001).

3.7 SOCIAL SUPPORT AVAILABLE FOR SINGLE-MOTHER FAMILIES AFFECTED BY ALCOHOL

Social support in a person's life implies having meaningful relationships with other people, including family that can be a support in times of crisis or need. Social support acts as a buffer against adversity and enhances wellbeing. Research about social support indicates that there are four subtypes of social support, namely, emotional, instrumental, appraisal, and informational support. In this section the subtypes of social support that should be available to single mother's families affected by the misuse of alcohol are discussed.

Single-mother families where the mother misuses alcohol, need support. Literature shows that social workers do not specialise in substance use, however, social workers can offer non-specialist interventions to assist single mothers with alcohol misuse issues. Literature indicates that once alcohol problems have been identified the role of

social workers emerges, as social workers can provide a referral to an alcohol service for full assessment to the single mother, or social workers can play an advocating role by means of offering peer support groups to help sustain positive change (McCarthy & Galvani, 2012).

Because of the negative influence that alcohol misuse has on families, particularly on single-mother families, support is often required on all four levels of the Ecological Systems Theory, i.e., the macro-, exo-, meso-, and micro-levels, as these will improve their emotional, psychological, physical, and economic wellbeing.

The following section consists of a brief discussion on the significance of support services to single-mother families affected by alcohol misuse, whereafter social support will be discussed within the framework of the different levels of the Ecological Systems Theory.

3.7.1 Nature of social support services

Social support is an important factor that helps people cope successfully. Therefore, social support has been extensively researched for its possible beneficial impact on an individual's overall health and wellbeing.

According to Glanz, Rimer and Viswanath (2008), the provision of social support is one of the most important functions of social relationships. The term social networks refer to linkages between people that may provide social support and may serve functions other than providing support.

Therefore, in the following section social support on the different levels of the ecological systems theory will be discussed.

3.7.1.1 *Social support on a micro-level*

Hepworth, Rooney, Rooney, and Strom-Gottfried (2013) state that support from family and friends can combat the effects of stresses. People who do not have these social networks may react to stresses for instance, by being depressed, by using drugs, and by binge drinking (Hepworth et al., 2016). Family support is important as it can improve the family wellbeing in aspects such as healthy family relationships, less conflicts, and domestic violence etc. Strydom (2012) is of the opinion that family counselling is crucial

on this level. She states that family counselling is required in families where there is substance misuse (Strydom, 2012).

Robert et al. (2016) suggest that if one grew up with a lack of family love or with family problems, one of the steps to be taken to improve and protect the emotional wellbeing of the family is to attend therapeutic sessions. Family counselling could improve a family's wellbeing. It is also children that need social support where a parent misuses alcohol (Shonkoff, Garner, Siegel, Dobbins, Earls, McGuinn, Pascoe & Wood, 2012).

3.7.1.2 Social support on a meso-level

According to Hepworth et al. (2013:15) support on the meso-level is received from interpersonal relations such as support groups and neighbours. These relations are of a less intimate nature compared to relations of families and friends. However, they are more intimate than the relations the client system will have with institutions at the macro-level.

As indicated in previous chapters, alcohol misuse of single mothers' families of South Africa has become prevalent. The research done by Brooks, Lòpez, Ranucci, Krumlauf and Wallen (2017) on social support show that every vulnerable individual including a single mother who misuses alcohol requires social support from family, neighbours, support groups and from the environment.

The kind of support depends on the reasons why a mother would misuse alcohol. For instance, not everyone misuse alcohol to cope, some people end up indulging in alcohol because of environmental factors, the media, lifestyle, and entertainment (Brook et al., 2017). For some single mothers who misuse alcohol, the support from families or neighbours might be very helpful as these mothers may feel stigmatised or stereotyped. Support groups on the other hand are advisable as they will allow single mothers who misuse alcohol to share their experiences.

A support group is defined as an organisation that brings people together to share their problems experiences, challenges, and ideas and to provide emotional support for group members. According to Brook et al. (2017) the biggest advantage of these groups is that members realise they are not alone in their situation. It can be said that

this type of peer support serves as a safeguard between the clients and their environment.

For the purpose of this study, the support groups may help the single mother to learn new behaviours and provide a platform for social interactions and become motivated to change her old behaviour that involved the misuse of alcohol. Conversely, a lack of perceived social support can have detrimental effects on recovery, for example, it has been reported that alcohol-dependent individuals who achieve abstinence, may experience relapse due to social exclusion (McCutcheon, Lessov-Schlaggar, Steinley, & Bucholz, 2014).

3.7.1.3 Social support on an exo-level

According to Engelbrecht (2014) social service organisations are a collection of individuals with unique attributes such as values, needs, motivations and skills. They are guided by certain norms and organisational culture and always have specific outcomes for individual groups, families, and communities. These organisations specifically provide social services to individuals, groups, families, and communities who need special assistance (Engelbrecht, 2014).

In this regard, the availability of non-profit organisations (NGOs) such as Welfare organisations in South African communities add value to service rendering by supporting vulnerable families. Single-parent families also fall under this category. The White Paper for Social Welfare (RSA, 1997) articulates South Africa's developmental and inclusive approach to social welfare.

The White Paper for Social Welfare (RSA, 1997) aims to meet people's basic needs and build their capacity, so that all South Africans can achieve their aspirations and participate fully in social, economic and political life. The White Paper further outlines a comprehensive system of services to ensure that all people have economic and social protection, and access to welfare programmes that promote development (Marti, Hall & Lake, 2016).

According to Bronfenbrenner (1979), the exo-level is classified as a service system that includes community support services and existing resources. Numerous

researchers are of the opinion that social support on this level has the potential to help recovery efforts (Stevens, Jason, Ram & Light, 2015).

Alcohol Anonymous (AA), rehabilitation centres, child welfare organisations and community support groups are all suggested social support services that may be able to assist vulnerable groups and individuals, especially single mothers with alcohol problems (Stevens et al., 2015). The relationship between support services and maintaining sobriety is strongly demonstrated in AA, being one of the most commonly utilised self-help groups for individuals with severe AUD. Stevens et al. (2015) also noted a positive relationship between social support and abstinence. The support that AA offers could thus assist people to who struggle with alcohol misuse to remain sober. (Steven et al., 2015). According to Mowbray, Quinn and Cranford (2014) general social support refers to a sense of community, child welfare organisations, rehabilitation centres, and an affiliation with Alcoholics Anonymous (AA). Therefore, recovery and a change in behaviour may be promoted through a relationship with the aforementioned support services.

3.7.1.4 Social support on a macro-level

On a macro-level single-mother family can qualify for support from the South African Social Security Agency (SASSA). SASSA is a government agency that was established in April 2005 and that provides various grants to South Africans. One of these grants is the grant for child support for carers of children with a minimum income. SASSA manages both the application process as well as the monthly payments of these grants (DSD, 2018).

It is disturbing that after twenty-five years of democracy, the majority of South African households are still living in poverty and are struggling to support their families financially. Within this context the SASSA child support grants aim to help families provide in the basic needs of their children. These grants are not meant to replace any income but just to bridge the gap in the cost of living (DSD, 2018).

In order to receive this grant, a SASSA criteria must be met (DSD, 2013). Only a primary caregiver of a child which could be a parent, grandmother, or anyone who is primarily responsible to provide care to the child may apply for the grant, applicants should be South African citizens or have permanent residency, they may not earn more

than R48 000 a year (R4 000 a month) if they are single. If they are married, the couple's combined income should not be above R96 000 a year (R8 000 a month).

The general requirements for a child to qualify for the child support grant are that the child must be under the age of 18 years, must not be in the care of a state institution, and should live with a primary caregiver (DSD, 2013).

3.8 CONCLUSION

In Chapter 3 the wellbeing of single mother's families affected by alcohol misuse was discussed along the perspective of the Ecological Systems Theory. In order to gain in-depth understanding of the phenomenon, the chosen theory aided the researcher to gain knowledge through four sublevels of the Ecological Systems Theory. The nature of single-mother families was also discussed, and it was discovered that the emotional, economic, educational and spiritual wellbeing of single-mother families is negatively influenced by substance misuse, as discussed earlier. It was also established that there is social support available for single mothers' families affected by alcohol misuse based on the four sublevels of the Ecological Systems Theory, these are the micro-, meso-, exo- and macro-levels. However, in spite of the existing support, the wellbeing of the single mother's families affected by alcohol misuse has vast negative outcomes that must be addressed.

CHAPTER 4:

EMPIRICAL INVESTIGATION OF THE INFLUENCE OF ALCOHOL MISUSE OF SINGLE MOTHERS ON THE WELLBEING OF THEIR FAMILIES AS REFLECTED BY SERVICE PROVIDERS

4.1 INTRODUCTION

In Chapter 2 the nature and extent of alcohol misuse and its influence on individuals, families, and communities (objective one) were discussed. This was followed by Chapter 3 where the wellbeing of single mothers affected by the influence of alcohol misuse were studied within the framework of the Ecological Systems Theory (objective two). This chapter aims to meet objective number three, i.e. to empirically investigate the influence of alcohol misuse of single mothers on the wellbeing of their families as reflected by service providers. This will be done through presenting the analysis on the reflections for social service providers on the influence of single mothers' alcohol misuse on the wellbeing of their families.

To achieve the main objective of this chapter, the researcher analysed data according to a qualitative analysis approach being a determined research methodology. The semi-structured method was used to collect data, and which was analysed according to an exploratory and descriptive design. The relevant deductions regarding the identified themes, subthemes and categories will be presented in this chapter. The specific reference to the collected data from the social service providers will aid in the achievement of this chapter.

4.2 SECTION A: RESEARCH METHOD

In this section an overview of the research method that was used to collect the data in relation to the interpretation and analysis of the empirical findings are presented. Broadly, the research methodology was constructed through the research question, the aim of the research, the goal and the objectives of the study, the research approach, the research design, the sample, the instruments used for data collection

and as data analysis. In Chapter 1, the research process was discussed. The researcher will briefly reflect on the research process in this section.

4.2.1 Research question

The research question aimed at understanding the influence of alcohol misuse of single mothers on the wellbeing of their families according to the social service providers. During the process of data collection, analysis, and interpretation, the abovementioned question was put to the participants. With their answers the researcher was able to gain an understanding of the reflections from social service providers (participants) on the influence of single mothers' alcohol misuse on the wellbeing of their families. A detailed discussion about these reflections will follow in Section B of this chapter.

4.2.2 Goals and objectives

The aim of the research was to investigate and understand the influence of single mothers' alcohol misuse on the wellbeing of their families from the perspective of social service providers working in the Western Cape, South Africa. To achieve this goal the research had to be planned properly. This was done by formulating, four objectives, they are

- To present the nature and extent of alcohol misuse and its influence on individuals, families and communities.
- To describe the family wellbeing affected by alcohol misuse of single mothers within the Systems Theory and the Ecological Perspective, which will be referred to as the Ecological Systems Theory.
- To empirically investigate the influence of alcohol misuse of single mothers on the wellbeing of their families as reflected by service providers.
- To develop relevant conclusions and recommendations regarding alcohol misuse in single-parent families.

As mentioned, the first two objectives were achieved in Chapters 2 and 3 of this study. These chapters provided insight on the topic as the literature and research regarding substance misuse and the wellbeing of single mothers who misuse alcohol were

explored. In Chapter 4 the data collected during the interviews will be analysed and interpreted.

4.2.3 Research approach

The researcher used a qualitative study, including certain quantitative elements, to gather and analyse the data. This qualitative approach was used to collect detailed data from participants that was descriptive in nature and that expressed the reflections and views of the participants. Their opinions on the influence of alcohol misuse on single-mother families and their wellbeing were explored (Bryman, 2012). Bryman (2012) is of the view that this type of research strategy is more concerned about the words rather than statistics when it comes to the data collection process. Babbie and Mouton (2010), view this approach as one that assists qualitative researchers in their attempt to study human action from the insider's perspective, which is referred to the emic "perspective". Through this approach, the participants were allowed to be descriptive, informative, and inclusive with their replies.

4.2.4 Research design

The research design for this study was exploratory and descriptive in nature. The researcher aimed to explore and describe as precisely as possible the influence of alcohol misuse on the wellbeing of single-mother families (De Vos, Strydom, Fouche & Delport, 2011).

4.2.5 Sample

For the purpose of this study, the researcher used a non-probability purposive and snowball sampling method. De Vos et al. (2011) indicate that in a non-probability sampling, the odds of selecting an individual are not known because the researcher does not know the population size and as purposive sampling does not allow the researcher to generalize to a population. The researcher chose to use this type of sampling as it allows for the research to focus on a specific area or population rather than on the probability

In addition, snowball sampling was used where some participants provided names of other participants who met the criteria for inclusion (Babbie & Mouton, 2010). So, the researcher utilized both purposive and snowball sampling in order to obtain the

sample. Permission was obtained from the different organisations before participants were interviewed.

The sample group consisted of 20 participants as identified within the geographical area of the Western Cape Province. Social service providers from government sectors and non-profit organisations (NGOs) were utilised during the collection of data.

Four participants were primary school educators who had been working with children of single mothers who misuse alcohol. Fifteen participants were qualified social workers from different NGOs who had been working with children of single mothers with alcohol problems as well as single mothers suffering from alcohol addiction. One participant is a community keeper who is employed at a welfare organisation. All the participants met the criteria for inclusion of the study. The following criteria for inclusion applied.

The participants had to:

- render services to individuals, groups, and communities that are affected by the misuse of alcohol of single mothers.
- be employed by either a welfare organisation or non-government organisation (NGO) in private practice
- have at least two years' work experience
- be proficient in English
- be employed in the geographical area of the Western Cape Province

4.2.6 Instruments for data collection

As the study was qualitative a semi-structured interview guide was utilised to collect data. Interviews were conducted to capture the views, reflections, experiences, and perceptions as expressed by the selected participants for this study. De Vos et al. (2011) maintain that in general, researchers use semi-structured interviews in order to gain a detailed picture of a participant's belief about, or perceptions and accounts of a topic. This method gives the researcher and the participants much more flexibility. For this study the researcher used semi-structured one-on-one interviews to get in-depth information from the participants (Annexure B). The interviews took place in a private

and convenient venue for the participants, they took between 45 and 60 minutes and were conducted between May and August 2019.

To enable the researcher to collect all the data expressed by the participants, she made tape recordings of the interviews (De Vos et al., 2011). For this all the participants gave informed consent before the interviews were recorded (Annexure A). The advantage of recording interviews during data collection allows the researcher to transcribe the dialogue. It is also very convenient as the researcher could refer to the recording after each interview to complete her notes and observations. The interviews were transcribed shortly after they were conducted (Maree, 2016).

4.2.7 Data analysis

Data analysis is the activity of making sense of, interpreting and theorising data. De Vos et al. (2011) maintain that, after gathering data, recorded interviews require transcription to be organised and analysed. A thematic analysis was used when analysing the qualitative data to refer to the extractions of key themes in this research (Bryman, 2012). Additionally, thematic analysis was used to define core themes, subthemes and categories after collecting data. It was the most appropriate approach as the researcher conducted one-on-one interviews and made audio recordings. Bryman (2012), suggests that a qualitative research strategy that uses this form of analysis are indicative of adopting a thematic approach. Therefore, thematic analysis was useful as the researcher was able to analyse data according to themes and patterns for the most repeated information after collecting the data. The following section will indicate and discuss in detail the mentioned themes, subthemes and categories where the researcher correlated the data collected from the participants to the relevant literature and theoretic frameworks (De Vos et al., 2011).

4.2.8 Ethical consideration

This research study investigated the reflections of social service providers rendering services to individuals, groups, and communities that are affected by the misuse of alcohol of single mothers.

The researcher chose to conduct interviews with social service providers to avoid direct exploitation of the single mothers' interpersonal problems. Interviews were done

indirectly to gain more understanding on the experiences of the social service providers relating to the influence of alcohol misuse of single mothers' families on their wellbeing. Babbie and Mouton (2010) view ethics as typically associated with morality as both deal with matters of right and wrong. For this reason, the researcher applied voluntarily participation, i.e. the participants could volunteer to take part in the study. Furthermore, the subject of the study did not harm any participants. Babbie and Mouton (2010) are adamant that social research should never injure the people being studied, regardless of whether they volunteer for the study or not. This was a low-risk study, and as previously mentioned the researcher did not deal directly with the target group. Therefore, ethical clearance for this study was provided by the Department of Social Work at Stellenbosch University to protect the participants (See Annexure C).

The confidentiality principle was applied during the study. Any information that was obtained in connection with this study and that was identified by the participants, remained confidential and is kept confidential. It was clearly indicated that it would be disclosed only with the participants' permission or as required by law. Confidentiality is maintained by keeping data in a secure place such as on computers where the researcher is the only one with access. Hard copies of the transcriptions are kept in a locked cabinet in the supervisor's office.

In addition, the researcher ensured that informed consent was given to all participants prior to the process of data collection. The researcher had to explain in detail to each participant the purpose of the study and how the information would be collected and utilised. The information given allowed the participants to decide in favour or against voluntary participation of the research (See Annexure A).

4.2.9 Results of the investigation

The results of the investigation will be presented in two sections; Sections B and C. In Section B the identifying details of the participants are discussed, and in Section C the empirical investigation of the reflections of social service providers on the influence of single mothers' alcohol misuse on the wellbeing of their families is presented and discussed. As mentioned in previous sections, these results will be analysed according to the themes, subthemes and categories that have emerged during the process.

4.3 SECTION B: EXPOSITION OF IDENTIFYING DETAILS OF PARTICIPANTS

In the following section the gender, age, qualifications, and years of experience of the participants are discussed. This section contains some quantitative data regarding identifying details of the participants who took part in the study.

4.3.1 Profile of participants

Biographical information of the participants is displayed and discussed in this section, concurring to the scheduled set of questions that were asked during the collection of data. During this type of questioning, participants were asked to describe their gender, age, qualification (including current position) and years of experience. Therefore, in order to present a clear picture about the participant's profile, relevant figures and tables have been utilised for this purpose. Table 4.1 represents the profile of the participating social service providers during the process of data collection.

Table 4.1: Profile of the participating social service providers

Profile of the participating social service providers		
<u>Gender</u>	Frequency n=20	Percentage
Females	15	75
Males	5	25
<u>Age</u>		
23-30 years	6	30
31-40 years	8	40
41-50 years	6	30
<u>Qualification/current position</u>		
Social Workers	14	70
Educators	5	25
Community keeper	1	5
<u>Years of experience</u>		
2-4 years	11	55
5-8 years	2	10
9-15 years	4	20
16-30 years	3	15

The data in Table 4.1, indicate that 15 (75%) of the participants were females and 5 (25%) were males. In terms of age, 6 (30%) participants were between the ages of 23 and 30 years, 8 (40%) of the participants were between the ages of 31 and 40 years and 6 (30%) were between the ages of 41 and 50 years.

With regards to their qualification and current position, out of 20 participants, 14 (70%) were qualified social workers and currently working as social workers.

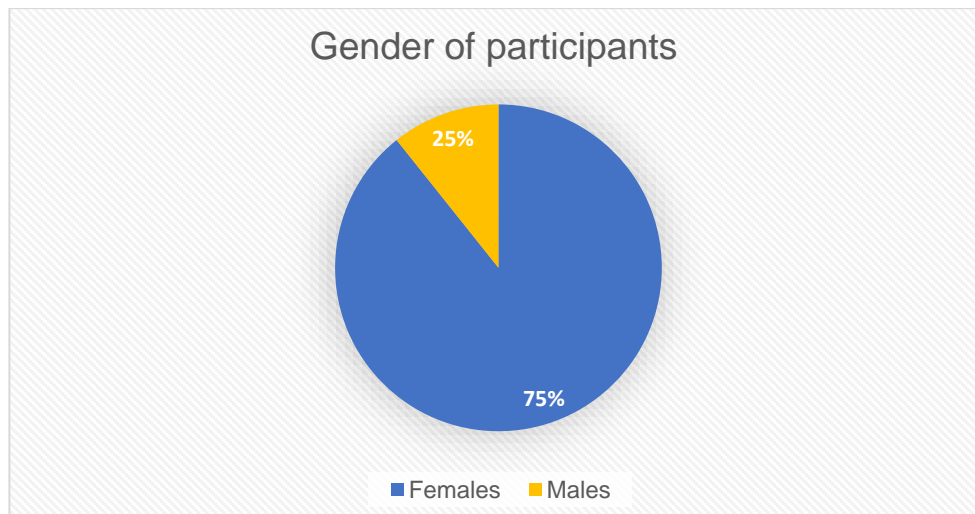
Of the participants, 5 (25%) were educators and currently work as teachers, and 1 (5%) participant is a community keeper and is currently running an organisation where she works as a facilitator to single mothers who are misusing alcohol. Concerning the years of working experience, out of 20 participants, 11 (55 %) have been working for 2 to 4 years, 2 (10%) have 5 to 8 years of working experience, 4 (20%) have 9 to 15 years of working experience and 3 (15%) participants have experience between 16 and 30 years. According to the abovementioned data the social service providers in this study could provide the required information based on their experience and knowledge.

The following subsections will provide a breakdown of the biographical information as presented in Table 4.1, and includes gender, age, qualification or current position, and years of working experience.

4.3.1.1 Gender

Of the 20 participants who were interviewed, 75 percent were females and 25 percent were males. This is illustrated in Figure 4.1. This distribution of male and female social workers concurs with how social work is often described as a female-dominated profession (Hicks, 2015). This also shows that although in the minority, male social service providers also render services like their female counterparts to disadvantaged individuals, families, communities, and society at large.

Hicks (2015) further notes that theorists of gender often view social work as something that only women do. Adding to this is that when there are males in the social work profession, they often end up occupying senior positions. Hicks (2015) continues that women need to be released from the burden of caring for dependents and that men should also care for dependents.

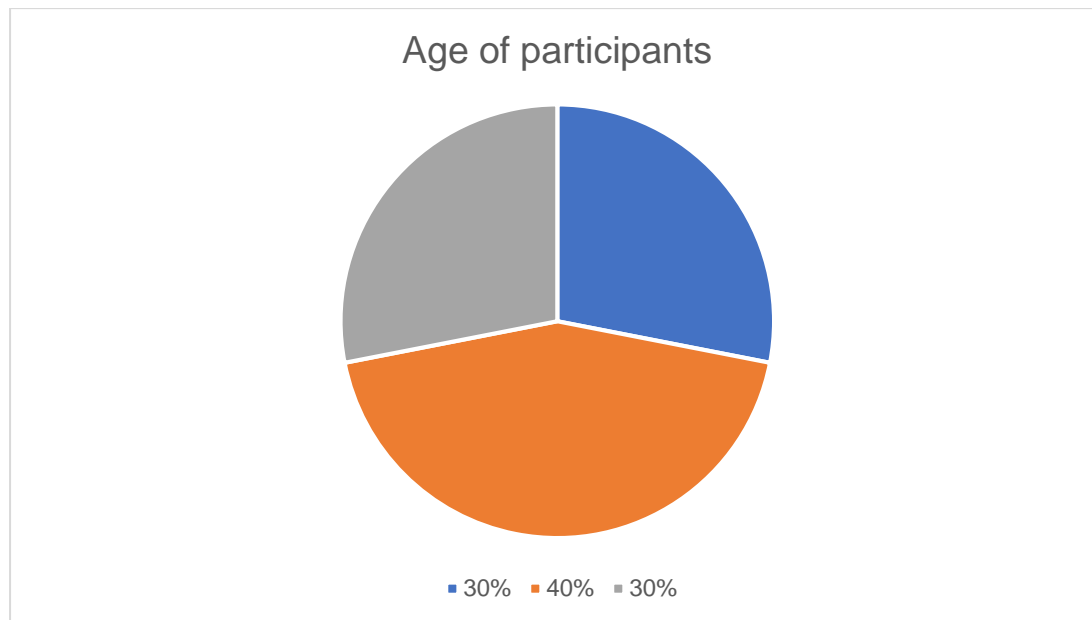


N=20

Figure 4.1: Gender of participants

4.3.1.2 Age of participants

Researchers such as Pretorius (2018) suggests that it often helps to have mature, qualified social workers in the field as experience could be very valuable in service rendering, not only in social work, but also other social service settings. On the other hand, it is argued that newly appointed, recently graduated professionals, often outperform their older counterparts in the field, especially if the emerging of neoliberalism in social work is considered (Pretorius, 2018). Because both arguments have merit, it is suggested that age does not matter in the social work profession. Nevertheless, the researcher chose to interview a spectrum of social service providers regarding their age. Table 4.1 indicated the ages of all participants that were interviewed during the collection of data. Figure 4.2 provides a clear picture about the age of the participants.



N=20

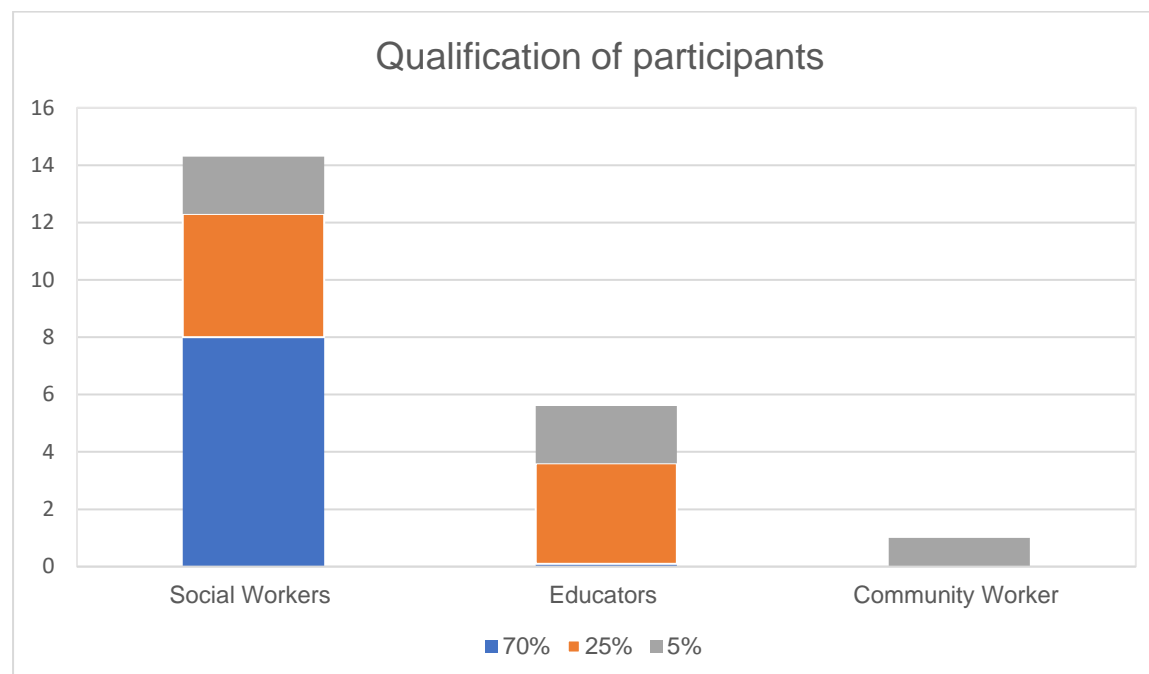
Figure 4.2: Age of participants

As seen in Figure 4.2, of the 20 participants who were interviewed, 6 (30%) participants were between the ages of 23 and 30, 8 (40%) were between 31 and 40 years old and 6 (30%) were between 41 and 50 years of age, which indicates a good range between the different age groups of the participants.

4.3.1.3 Qualification or current position

In Chapter 1 it was mentioned that social service providers are front line in identifying and addressing social issues of disadvantaged groups including individuals, families, and communities. Therefore, in order to identify each participant's qualification or current position the researcher asked them about their current positions at their employers along with their qualifications. Thus, of the 20 participants indicated in Table 4.1, 14 (70%) were qualified social workers registered at the South African Council for Social Services Profession (SACSSP) and working at different NGOs. Of the remainder of the participants, 5 (25%) were qualified educators and 1 (5%) participant was a community keeper at Khayamandi. All the above-mentioned professions fall under social service organisations. These organisations are regarded as social change promoters that help solve problems in human relationships as well as empower and

liberate people to enhance their wellbeing (RSA, 2018). Figure 4.3 portrays a clear picture of the qualifications of the participants of the study.



N=20

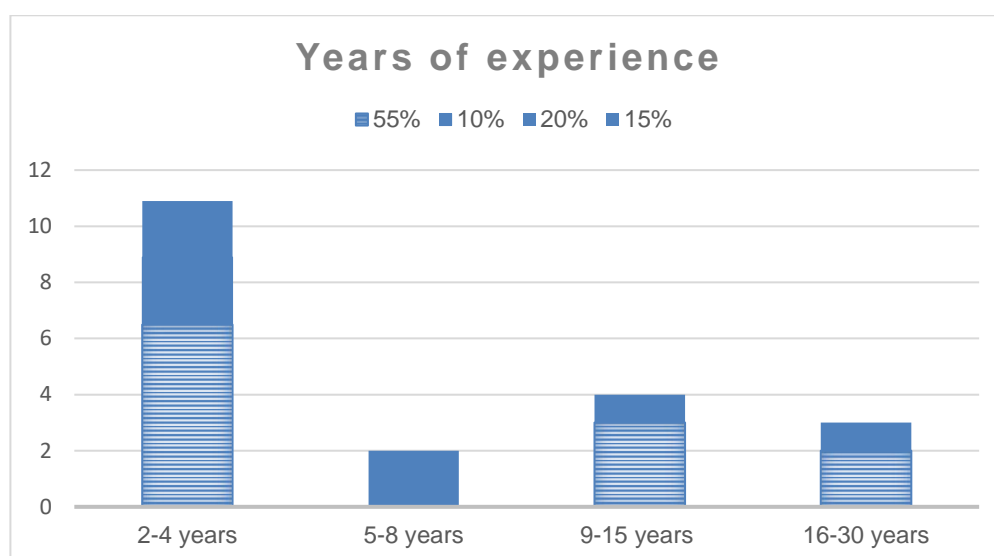
Figure 4.3: Qualification of participants

As indicated in Figure 4.3 above, of the 20 participants that were interviewed, 14 (70%) were qualified social workers, 4 (20%) were qualified educators and 1 (5%) was a community worker. Although the 4 qualified educators did not directly render services to mothers who misuse alcohol, they had meetings with the mothers, discussing the wellbeing and safety of the children and formed part of a multi-disciplinary team rendering services to families. It was significant to not only interview social workers but also other social service providers in order to gain a broader picture of the research topic of this study.

4.3.1.4 Years of experience

Nhedz and Makofane (2015) argue that experienced social workers should produce quality work in their working organisations. The same apply for other social service providers. These service providers need to have had sufficient and adequate training, as this prepares them to effectively respond to the clients they work with. To be able to do this would however require more years in the field. According to Nhedz and

Makofane (2015) social workers with less experience, lack the capacity to effectively respond simultaneously to the demands of vulnerable families and their clients. Overall, literature reveals that experienced social service providers are needed when dealing with complex, social problems especially alcohol misuse because social workers normally seek to understand the client in their environment and in the wider context of their lives while acknowledging the interplay between the person's past, present and future. Importantly, it should be noted that social workers aim to protect those at risk from harm, from themselves, and from others and are often faced with complex and competing demands relating to care and control (Galvani, 2015). Figure 4.3 represents the years of experience of the participants.



N=20

Figure 4.4: Years of experience

This graph indicates the years of experience of the 20 participants. The majority, 11 (55%) of the participants have between 2 to 4 years of experience within their working place, 2 (10%) of the participants have between 5 to 8 years of experience, 4 (20%) of the participants have 9 to 15 years of working experience, and 3 (15%) of the participants have between 16 and 30 years of working experience.

In this section quantitative approaches were utilised to analyse and interpret the biographical information of the participants. The following biographical were analysed and interpreted: gender, age, qualification or current position at their respective

organisations/working place and years of their working experience. Section C will analyse the qualitative finding of the study.

4.4 SECTION C: EMPIRICAL FINDINGS OF THE STUDY

This section comprises a discussion of the various themes, subthemes, and categories which were identified through data collection in the semi-structured interviews. This will be done by means of a determined process whereby each theme will be further analysed into separate subthemes.

Table 4.2 provides a summary of the entire section. A detailed discussion will be provided to further explore the analysis and interpretation of data collection. As mentioned, themes, subthemes and categories relevant to this study, are presented below.

Table 4.2: Themes, subthemes and categories:

The wellbeing of single mothers' families affected by alcohol misuse: The reflections of social service providers		
Theme	Subtheme	Categories
Theme 1: Microsystem	Subtheme 1.1: Background information of the single mothers	a. Physical environment b. Dependents c. Employment history d. Education
	Subtheme 1.2: Wellbeing of the single-mother family	a. Family members b. Psychologically c. Financially d. Educationally
Theme 2: Mesosystem	Subtheme 2.1 Shebeens	
	Subtheme 2.2 Peer group	
Theme 3: Exosystem	Subtheme 3.1 Role of social workers	
	Subtheme 3.2 Organisations	a. Child and welfare organisations b. Treatment centres (rehabilitation organisations)
	Subtheme 3.3 Support groups	a. Parental support group b. AA
Theme 4: Macrosystem	Subtheme 4.1 Policies and legislation	a. Children's Act (38 of 2005) b. Prevention Treatment of Drug Dependency (Act 70 of 2008)
	Subtheme 4.2 Culture	a. Stigma/stereotype b. Language

As can be seen from the information provided in Table 4.2 four themes were identified with relevant subthemes and categories that will be discussed below.

4.4.1 Theme 1: Microsystem

To begin the process of data collection, participants were asked to reflect on their knowledge about the background information of single mothers who are likely to misuse alcohol. It was decided to pose this type of question with the view of Ettekal and Mahoney (2017) that background information of people could provide guidelines regarding service rendering. As discussed in Chapters 2 and 3, the microsystem is the most immediate ecological system within which individuals directly interact (Pardeck, 2015). Therefore, the participants were asked if they could relate the influence of alcohol misuse to the background information of single mothers who misuse alcohol. The background information includes the type of area the single mothers reside in, whether they have dependents at home, their employment history, their source of income, and their level of education. From the participants' responses it emerged that the abovementioned subthemes were significant. The following categories formed from each subtheme of the microsystem will now be further elaborated on.

4.4.1.1 Subtheme 1.1: Background information of the single mothers

In Chapter 3 of this paper the term “wellbeing” was debated extensively (Ereaut & Whiting, 2008; Hart, Blincow & Thomas, 2007; Simpson & Murr, 2014). For social service providers it is crucially important to first obtain the background information of their clients in order to understand the wellbeing of the client system in depth, as such an understanding could assist the social service provider when dealing with the problem. This view is confirmed by Johnson and Yanca (2010) as they state that obtaining the relevant background information of a client's life is helpful in determining the course of action that has to be taken, or the type of service that has to be delivered. This background information can be obtained from various categories, such as biological and health related issues, psychological issues, educational attainment, and employment.

For the purpose of this study, the researcher focused on basic information such as the target group's immediate physical environment, the number of dependents at home, their employment history, their income source, as well as their educational level.

In viewing the background information of single mothers who misuse alcohol, most of the participants' responses were similar. Their narratives and each of the categories will now be discussed.

“Okay, well not generalising but in most cases 90 percent of single mothers that misuse alcohol are illiterate, unemployed and themselves coming from disadvantaged backgrounds with a number of children or dependents to care for ..., but there are those rare cases that the mothers are employed but the illiteracy level is still high. Sometimes you find that they started misusing alcohol even before they become mothers, and of course due to a high rate of illiteracy, they mostly depend on a child support grant.” Participant 15

From the above narrative, the following categories were identified that best describe the background information of the single mothers who misuse alcohol. These categories are the physical environment of single mothers, number of dependents, employment history, income source, as well as their educational level.

a. Physical environment of single mothers

For the purposes of this study the physical environment is a place where a person lives permanently (Macionis & Plummer, 2012). This study was conducted in the Western Cape Province, specifically in the areas that fall under the City of Cape Town region as well as the Cape Winelands area. From these areas, it appeared that most of the participants indicated that the single mothers that they are rendering services too, usually come from low socio-economic communities. A significant number of participants also indicated that the misuse of alcohol of single mothers from these areas are notable compared to middle class communities. This supports the findings of a study conducted by Jones and Sumnall (2016) which shows that there is a strong relationship between poverty and alcohol misuse. Although alcohol misuse poses a threat to anyone who drinks excessively it seems to be people in poor areas that are more vulnerable to alcohol misuse. This is due to several factors such as a lack of support, poor access to health facilities, and few available resources (Dada et al., 2018). In this category, the majority of the participants confirmed that single mothers who come from disadvantaged communities appear to misuse alcohol more than those from more privileged communities.

Carelse (2018) states that vulnerable groups such as single mothers in disadvantaged communities often resort to substance misuse as a means to cope, at least temporally, with their challenges. Narratives below display the effect of the physical environment on single mothers.

“Uhm ... okay. We mostly work in areas where poverty is very significant and also, we also find that mostly we work with single parents (mothers) because most of the time fathers are absent ...” Participant 6

“Okay, well not generalising but in most cases 90 percent of mothers that misuse alcohol is illiterate, unemployed and themselves coming from disadvantaged backgrounds.” Participant 8

“The environment I am working at is very overcrowded and most families are poor ...” Participant 11

“... But there is high percentage of those that are not working, and this makes them stress too much since they do not have means of survival.” Participant 12

From the above narratives, it is evident that poverty is one of the factors that could lead to alcohol misuse. As seen by some researchers (Jones & Sumnall, 2016; Pache & Myers, 2012) poor families become vulnerable since they are more frequently exposed to stress and trauma due to a lack of resources or capital which causes them to struggle with these challenges. This struggle often leads to alcohol misuse. Consequently, it may be concluded that social service providers view communities with a low socio-economic background as a possible factor that could lead to alcohol misuse of single mothers.

b. Number of dependants

As discussed in Chapter 1 it is quite common to find a single mother whose partner left her, or who is a sole parent, that cares for one or more children without the assistance of another parent at home (Paul & Bricks, 2006). Single motherhood often results in having an overload of responsibilities which makes caring for children alone, very taxing (Richter & Lamola, 2017). In this category, most participants confirmed the number of dependents in single-parent households are more than two which creates more stress and responsibility.

“... and you find that each single mother has got two or three kids. So, you find that alcohol is being used as means to cope with the aim of ignoring all problems they face.”

Participant 17

“Eh ... unfortunately we do have several such cases in our school, and they normally have two or three dependants who all attend primary school.” Participant 13

“Most of them are not working and would find that their level of education is low because most of them did not even make grade 12, and their dependents is mostly two or three kids, but few only have one child.” Participant 10

Literature (Richter & Lamola, 2017) regarding a single mother as a primary caregiver, who needs to provide and support for children in all means without an assistance of a partner, indicates that such a single mother is more vulnerable to alcohol misuse. Single mothers often have too many responsibilities which continually put them at high risk for stress and depression. Thus, it can be said that the higher the number of dependents in the household, the greater the chances of the misuse of the alcohol as a result of stress and burnout.

c. Employment history

According to South African Statistics on unemployment, the country's rate of unemployment increased by 27.6 percent in the first quarter of 2019 from 27.1 percent at the end of the fourth quarter of 2018 (Unemployment Stats SA, 2019). This shows that unemployment in South Africa remains an unresolved issue. During the process of data collection, participants were asked to share their views and reflections about the status of the single mothers that they provide services for. Most of the participants' narratives indicated that the single mothers are unemployed, and that most of their households are mainly dependent on the Child Support Grant provided by the South African Social Security Agency (SASSA). As discussed in Chapter 3 of this study, SASSA provides a Child Support Grant of R420 a month if the primary caregiver of a child is either is not working or earning less than R4000 a month.

Participants in this study indicated that most single mothers who misuse alcohol have no jobs and are struggling to survive financially.

“Okay, I have worked with different kinds of single mothers in terms of low income and high-income families. The low-income single mothers usually depend on the SASSA grant.” Participant 2

“..., 95 percent of them are unemployed.” Participant 3

“... like because of many problems these mothers are faced with, they use alcohol to cope with their problems. Because they have to raise their children alone which leads to financial challenges since the money is not enough for the whole because most of them are mainly depending on SASSA grant particularly (Child Support grant).”
Participant 5

“They are unemployed and themselves coming from disadvantaged background serial with a number of children or dependents to them.” Participant 8

“Okay, so in terms of educational level, I would say, it is very possible to find single mothers who are abusing alcohol they’re not well educated, and mostly have primary high education.” Participant 20

Literature suggests that living without employment is a major problem. The situation becomes worse if a single parent (often a single mother) must provide financial support for the children. According to research (Black & Lobbo, 2008), there is considerable evidence of hardship when there is no financial means to survive. This again adds to the number of problems that already exist in these households.

Some of the narratives below indicates that a small number of single mothers have contract jobs, especially at wine farms. Some single mothers also have “piece jobs”.

“... some of them have piece jobs (and also, they drink because of stress so for them alcohol is a coping mechanism.” Participant 2

“They also do not have permanent employment, most of them here in the Western Cape they mostly depend on seasonal jobs, especially on wine farms. In the Western Cape most of the mothers you find them on the farms, and the source of income is always from the job they work for or SASSA grant.” Participant 20

Given the fact that piece jobs are legal in South Africa, it should be noted that for this kind of work, there are no benefits for workers and the salaries are low (Runciman, 2019). Despite the low salaries of part time work, participants indicated that it is still better to earn a little than to be unemployed.

Based on the aforementioned narratives, it is clear that the employment issue is still a problem in the Western Cape and that unemployment and low wages are some of the contributing factors to social problems, such as alcohol misuse in single-parent families.

d. Educational level of single mothers

Education has a huge influence in society at large. It serves as a platform for knowledge and skills for all citizens of the country (World Economic Forum, 2008). The missionary statement of the Department of Education is to mould the future of the nation by providing a balanced and well-rounded education and to develop all citizens to their full potential with a broader knowledge (Ministry of Education, 2010). Therefore, to prepare for success everyone needs to be educated and knowledgeable. It is common to see that most enterprises, whether public or private, recruit candidates based on their academic qualifications (Culkin & Mallick, 2011). However, referring to the correlation between poverty and education Jones and Sumnall (2016) state that being poor and not having an education could contribute to experiencing problems with alcohol misuse.

From the narratives that follow, it emerged that single mothers having poor or little education contribute to family stressors as these single mothers struggle to find skilled jobs in permanent positions.

“In my experience working with single mothers who are misusing alcohol, what I discovered is that their level of education is low because they just obtained grade 12 or even less than that.” Participant 12

“Most of them ... their educational level is low. You find that they did not finish grade 12 and because of alcohol misuse they cannot improve their educational level.” Participant 3

“Eh ... fortunately we do have such cases in our school, but in terms of educational level, in most cases the single mothers have a low educational level, and they are not employed.” Participant 7

The aforementioned narratives confirm literature of Setlalentoa, Ryke and Strydom 2015, namely that there is a close correlation between little education and the misuse of alcohol. However, most researchers (Dada et al., 2018; Jacobs, 2018; Ilomaki et al., 2013) agree that it is a combination of factors such as stress and poverty that could lead to alcohol misuse and not only a low educational level.

4.4.1.2 Subtheme 1.2: Wellbeing of the single mother

Ongoing research on wellbeing (Henry, Sheffield-Morris & Harrist, 2015) indicate that the term is reconstructed and interchangeable. According to the Ecological Systems Theory or family perspective, family wellbeing is more related to family integrity, family climate, family functioning, family resilience and of course coping. Therefore, for families, to function competently there should be an evidence of competence in fulfilling basic functions and a good ecosystem fit (Henry et al., 2015). In viewing the wellbeing of a single-mother family affected by alcohol misuse, researchers, such as Von Bertalanffy (2004), shed light on understanding how one should view the relationship between the two. Chapter 3 of the study highlighted that human wellbeing should be assumed as a “single dimension cause and effect”. It follows then that the misuse of alcohol of a mother within the family could be closely linked to poor family wellbeing (Bronfennbrenner, 1979). The above is reflected in the participants’ point of view when asked to reflect about the wellbeing of the family of a single mother with alcohol issues. Four categories emerged from this subtheme namely, family relationship, financial wellbeing, educational wellbeing, and psychological wellbeing.

Most of the participants agreed that family wellbeing is in many ways strongly affected by the alcohol problems of a mother.

“Uhm ... I would say children are mostly affected because most of the time you find that the mother does not really have to look after them for example. She (the mother) will wake up every morning and go to the shebeen or tavern to drink alcohol and the children will have to do everything for themselves especially when they have to go school. The situation is even worse if they are still young because the eldest one will

have to look after her or his siblings (child-headed household). On the other hand, the mother is also mostly affected as well because, as family counsellors we normally find that their psychological functioning is affected because they do realise that misusing alcohol is ruining her life and her children but they aren't willing to stop which is why we support them with providing counselling in order to make them aware about the dangers. Also, their health is at stake because we find that most of them end up practicing unsafe sexual relationships with too many boyfriends which leads to sexual diseases such as HIV and AIDS, STIs and even falling pregnant which will increase the number of children." Participant 9.

A discussion of the four categories that emerged follows.

a. Family relationship

Family is defined in previous chapters as an organised group normally connected by blood and commonly sharing the same space (Macionis & Plummer, 2012). Referring to family relationships of single mothers who misuse alcohol, literature (Henry et al., 2015) reveals that these families face more challenges as they experience and have to deal with issues such as anxiety and depression. However, the major challenges that families must deal with are the emotional, psychological, and physical outbursts. Furthermore, research (Effects of Drug Abuse on Families, 2018) shows that an addicted person may distance herself from the rest of the family. This is an indication of disconnection and poor communication between family members. However, despite the negative result of a parent withdrawing, some researchers (Gilvary, 2005; Strine, Mokdad, Balluz, Gonzalez, Crider, Berry & Kroenke, 2008) view this behaviour as a kind of advantage as the withdrawal of the addict may protect the rest of the family from possible abuse.

Child neglect in single-mother families affected by alcoholism, is a major challenge that needs to be addressed. This is due to a lack of emotional bonding, assistance in school homework, supervision, expressiveness, etc. (Point, 2006). According to Turning Point (2006), "alcohol misuse in families in general contribute to several challenges since mostly children are affected, and therefore needs to be addressed seriously for the sake of the children".

Participants were asked to reflect on how they view the relationship between family members and who is mostly affected within the single-mother family where a mother misuses alcohol. Most of the participants indicated that the children are affected the most by their mothers' alcohol misuse. The following narratives demonstrate the participants' reflections.

"It affects mostly the kids because social workers usually remove them to keep them in places of care. That makes the mothers struggle to build the relationship with their kids and end up not even knowing where their kids are being kept. When the kids come back, they start to disrespect them." Participant 2

"Well, the family relationship because the mother is always out to drink then of course the relationship is poor because if the mother is not drunk, then she is hungover and then she does not really form a good relationship because of the situation. And when they are drunk, they often fight (domestic violence). So, the family relationship is strenuous." Participant 5

"I would say the most affected in the household are the children. Normally they don't get enough support uhm ... no one support them financially in terms of uhm ... ya, the biological father does not pay maintenance and that's why probably she drinks even more to cope with that which also leads to poor family relationship. Normally the educational level is dropout rate before matric." Participant 2

"Uhm ... I would say children are mostly affected because most of the time you find that the mother does not really have to look after them, for example, she will (the mother) wake up every morning and go to the shebeen or tavern to drink alcohol and the children will have to do everything for themselves especially when they have to go school, the situation is even worse if they are still young because the eldest one will have to look after her or his siblings (child-headed household)." Participant 13

"There is a lot of conflict, the children are between the conflict and sometimes they become victims, and because of that it leads to the domestic violence because the mother is constantly fighting and children are always scared, going through all the emotions and alert of not knowing what will happen, it is just difficult for them because it even." Participant 17

From the narratives above, it is evident that alcohol misuse of a parent (mother) in single-parent families negatively affects children. Statistics across the country indicate the number of children exposed to parents using harmful drugs ranges between 250 000 and 300 000, whilst between 780 000 and 1.3 million children are affected by parental alcohol misuse (Turning Point's Report, 2006).

Based on the narratives, literature and statistics, it can firstly be concluded that relationships amongst the family members of single-mother families affected by alcohol are dysfunctional. Secondly, it is also important to note that within these families, children are the most negatively affected in many ways.

b. Psychological wellbeing

Psychological analysts argue that the psychological wellbeing of an individual should not include negative emotions that interfere with the individual's ability to function (Huppert, 2009). Thus, there is a suggestion on that there is a close relationship between the misuse of substances in general and poor psychological wellbeing (Strine et al., 2008).

During data collection, participants agreed that poor psychological wellbeing can be a result of alcohol misuse, however, their experiences varied. Some participants believed children's psychological wellbeing was mostly disrupted where others felt that the mother's psychological wellbeing were mostly at stake. Below are the narratives of participants who believed children's wellbeing was mostly affected by the alcohol misuse.

"Huge effect is on the children because they suffer with the absence of attachment ... because parents who do not show love to the kids at an early age affect them as they grow. So, I can say it's a psychological attachment, like wise love problem." Participant 14

"Yah, like I said that the children either go completely numb towards the parents. They are angry, they are hurt. Mostly the children just get depressed." Participant 16

"Absolutely, psychologically because a child always has to be in control of the situation ... it's like for them they always try to survive they actually shut down their own emotions, they shut down their own feelings, they don't feel anymore, because

feeling hurts. I can say they grow without a feeling; they are programming themselves since they are used to this kind of situation. Therefore, depression will kick in on a later stage.” Participant 11

According to literature (Turning Point, 2006; Strine et al., 2008) children living in these types of families have increased emotional problems, become more aggressive towards others, become withdrawn, or even taking part in antisocial behaviour as a means of coping (Jacobs, 2018). It is clear as noted by several researchers (Carelse, 2017; Dada et al., 2018) that children that come from problem-drinking families are more prone to experience psychological problems, likely to feel rejected, and experience absence of encouragement which seriously affect their development. The self-esteem of these children is also negatively affected, which could affect their own future for parenting capacity (Kepple, 2015; Neger, 2018).

On the other hand, participants who indicate that single mothers' psychological wellbeing are more affected by the misuse of alcohol noted the following:

“Probably, they always have psychological problems because if we look at the social perspective, looking at upbringing of the mother, how did she grow up, is there any abuse, or stress? Sometimes single mothers end up in depression because it's not easy to be a single parent raising a child alone and even worse if the father is around but not supporting you. So definitely there are setbacks which leads to psychological problems.” Participant 12

“In most cases psychologically you find that they give birth to babies with psychological issues or difficulties such as FASD and other psychotic disorders because of alcohol misuse.” Participant 10

“Psychologically, it affects them because I have experienced that they do not have that sense of responsibility, like taking that role of a mother is absent.” Participant 9

Some of the aforementioned responses show the misuse of alcohol as a result of psychological problems such as depression, whilst others believe that the misuse of alcohol per se contributes to psychological problems. Literature agree that both viewpoints of the participants as indicated above are valid. For instance, Lynskey and Agrawal (2008) and Strine et al. (2008) agree that women with major depressive

disorders are more likely to report intense alcohol abuse problems as compared to non-affected ones. When it comes to a “sense of being irresponsible,” psychological issues are associated with “inconsistency” and “unpredictability” of a mother or parent that leads to increased pressure of revising family roles which tends to rely on children’s own emotional and physical support (Turning Point Report, 2006). Again, it may be concluded that both the misuser and children are negatively affected psychologically due to the misuse of alcohol.

c. Financial wellbeing

Experts of financial wellbeing argue that “alcohol addiction is an expensive disease” which leads to a major drain on the family budget (Khosa & Khaleke, 2018). The Report on Financial Toll of Addiction (2019) confirms that there is a financial strain within families when purchasing alcohol, which in turn negatively affect the financial wellbeing of the whole family. It is thus important to note that there are always additional expenses related to social costs, legal fees, and health care. One should also note that the misuser may end up losing an income due to job loss (Guidelines on financial wellbeing on families, 2019).

The situation become worse where the family is mainly dependent on the South African Social Security Agency (SASSA) as their source of income. Most of the participants indicated a considerate impact on the financial wellbeing of families where a mother is unemployed and mainly depending on the SASSA Child Support Grant. It also appears that the grant is misused through spending the funds on unnecessarily items such as alcohol (Khosa & Kaseke, 2017). Most participants indicated that alcohol misuse of a mother could hugely affect the financial wellbeing of their families. Narratives below echo the participants’ views.

“In my view, mothers who misuse alcohol do not know how to budget and how to spend money because most of the time alcohol comes first.” Participant 17

“Financially, they are not doing okay, because they are not working and whenever they get the mother is always not enough to support the whole family and of course their priority is to buy alcohol. Children struggle.” Participant 16

“Imagine getting a support grant but yet they will use it to pay for alcohol, in most cases we usually, observe from the kids at school by wearing untidy school uniform and if ask them they will tell you that there is no soap in their home.” Participant 14

According to research, alcohol addiction may lead to poverty, since the family tends to struggle financially, kids may receive inadequate education, spend most of their time without food and even struggle with their own future budget (Khosa & Kaseke, 2017). In view of the aforementioned narratives, this shows that there is close relationship between the misuse of alcohol and poor financial wellbeing.

d. Educational wellbeing

Education according to Macionis and Plummer (2012), consists of social institutions guiding the critical learning of knowledge, job, skills, cultural norms and values. Educational wellbeing is a significant element for children across the country and goes hand in hand with aspects highlighted by the missionary statement of the Department of Education and discussed in Chapters 2 and 3 (Ministry of Education, 2010).

Within this context, one has to try and understand the educational wellbeing of children that come from single-mother homes affected by alcohol misuse of the mother. Research by Hart et al. (2007) suggest that where the mother of a single-mother family misuses alcohol it has a significant impact on the children from that family. It is reported that they struggle with behavioural and emotional problems, such as to manage and contain aggression, that they find it hard to communicate and get on with other learners, and that they struggle to concentrate which often results in them having to repeat classes (Hart et al., 2007). These problems are confirmed in the following narratives.

“Yah, their educational wellbeing is also affected as I have mentioned earlier, that it leads to poor performance to the kids, poor attendance and even school dropout due to a lack of support system back at home.” Participant 14

“As I have alluded in the previous question that the children do suffer educationally if the mother is misusing alcohol because she does not provide them with proper supervision especially, assisting them with schoolwork, not giving them proper care, they need like all other kids. Sometimes you find that their school uniform is untidy,

which makes them lack a concentration during school periods and they end up under performing and even become early school dropouts.” Participant 13

“Mostly, the children are coming from a family affected by alcohol misuse are not always neat, and their performance is constantly poor.” Participant 19

As highlighted by the Ecological Systems Theory, a child’s development is part of the context of the system relationships and his or her environment (Bronfenbrenner, 1979). Therefore, the above narratives and literature confirm a correlation between poor educational wellbeing of children and alcohol misuse of a mother in a single-mother family.

4.4.2 Theme 2: Mesosystem

Mesosystem is the second level found on the scale dividing all the levels of the Ecological Systems Theory as mentioned in Chapter 2 and displayed in Table 4.2. For this theme, two different questions were asked and that formed part of subthemes that emerged. Firstly, participants were asked to reflect on how alcohol is supplied in their respective communities they work with. Secondly, the researcher was interested to know if peer groups such as friends could play any role in a case where the mother misuses alcohol. The two questions are a result of how systems connect within the framework of the Ecological Systems Theory, for example, the connections between microsystems and mesosystems (connections between parents or family and social groups such as friends and neighbourhoods) (Rosa & Tudge, 2013). From the participant’s responses, two subthemes emerged namely: Shebeen and peer group/friends. These will be presented discussed below.

4.4.2.1 Subtheme 2.1: Shebeens

The Oxford English Dictionary defines a South African shebeen as an informal licensed drinking place in a township. Whilst, in countries like Scotland and Ireland it is an unlicensed reputable or private house in the business of selling alcohol to members of the community. According to South African Alcohol Policies, it should be noted that in South Africa not all shebeens are licensed (Liquor Policy Draft, 2012).

For this subtheme, it emerged that for most of the participants the accessibility of shebeens were a significant contributing factor in the misuse of alcohol of single mothers in their communities.

According to Du and Wam (2009) when measuring the way alcohol is supplied in townships, those who are closer to alcohol establishments are said to be more exposed to alcohol as these establishments are that much more accessible, compared to people living far. This is confirmed by the following narratives.

“The shebeens are in every community and sometimes my clients tell me that they can or its almost next door or in the next street which makes it easily accessible to them.”

Participant 1

“I think, uhm ... the shebeens especially local ones have a negative influence because they sometimes give these mothers alcohol on credit so they will pay when they have money. Sometimes they take their SASSA cards and ID documents and keep them as a proof. Also, the shebeens exposes their kids to alcohol because they even send their kids to buy alcohol for them.” Participant 3

“Well, yes, definitely because they are well known in the shebeens as a result for them accessing alcohol is easy because they can even buy it on credit.” Participant 6

The results of both the literature (Macionis & Plummer, 2012; Rosa & Tudge, 2013) and the participants' narratives suggest that shebeens have a great influence on single mothers to either start or continue misusing alcohol. It can thus be said that there is a positive correlation between available and accessible establishments selling alcohol and people in the area misusing alcohol. Furthermore, the participants mentioned that shebeen owners are always keen to sell their stock and will allow their customers to buy alcoholic beverages on credit, which links the misuse of alcohol to financial issues.

4.4.2.2 Subtheme 2.2: Peer group or friends

In general, a peer group is defined as “a group of people, in most cases, of a same age group, background, social status and same gender with whom a person connect with on a regular basis, and that can easily influence one's own beliefs, values and behaviour” (Macionis & Plummer, 2012). Many researchers have done research on peer pressure of adolescents as one of the contributing factors to substance abuse in

general (Jackson, Roberts, Colby, Barnett, Abar & Merrill, 2014). In viewing this subtheme for analyses purposes, social learning theory support the idea that peer influence control people to adopt their friend's behaviours (Fisher & Harrison, 2013). Therefore, when the participants were asked how they view the role of peer groups or friends in a case of alcohol misuse of a mother, they commented as follows:

"I my own view, it plays a huge impact because children in our classes when we have some conversations mention something with "my mom's friend". When they are drinking that's when I get a chance to play with my friends. So, I definitely think it plays a role because it is rare to find only one person who drinks." Participant 9

"They are all the same, because they have something in common, so it is really difficult for them to realise that they are having a problem." Participant 11

"Mm ... unfortunately, it seems as if they do not talk about these issues when they are together, which makes think that yes indeed it has a negative influence because when they are together they do not view it as a problem instead they encourage each other to continue with this kind of a behaviour, instead its escalating." Participant 13

"What I find the most is that alcoholic mothers struggle to pick mothers who are supportive of them and the circle continues." Participant 15

From the above narratives it appears that the participants agree that peer groups or friends play a major role in contributing to the misuse of alcohol of a mother. This correlates with the idea of Jackson et al. (2014) who view social norms as one of the contributing factors to peer groups on substance abuse decisions.

4.4.3 Theme 3: Exosystem

According to the Ecological Systems Theory, the exosystem suggests that social service providers that are available in communities are required to work closely by connecting clients with such services. The White Paper on Families (RSA, 2013) indicates that social support services delivered to service users should involve physical, emotional, mental, protection and rehabilitative services (RSA, 2013). In this respect, single mother families affected by an alcohol misuse need such support services.

From the research of the exosystem of the Ecological Systems Theory, two subthemes emerged, namely organisations and support groups. These subthemes are tabled in Table 4.2. From each theme, two categories were identified. Under the subtheme named organisations, child protection welfare organisations and rehabilitation organisations were identified. Under the subtheme support groups, parenting support and Alcoholic Anonymous categories were identified. For the purpose of this study, the exosystem is the third level which examines the service system including either community support services and/or resources that exist and social welfare services that are available to vulnerable groups such as single mothers (Bronfenbrenner, 1979). The following subtheme and categories serve as enlightenment for this theme.

4.4.3.1 Subtheme 3.1: Role of the social workers

The National Association of Social Work (2008) states the following as their mission: “the primary mission of social work is to enhance human wellbeing and help meet the basic human needs of all people with particular attention to needs and empowerment of people who are oppressed, vulnerable, and living in poverty” (Hepworth et al., 2013). Furthermore, the Social Work Code of Ethics for Social Workers (2014) as well as the Health and Care Professions Council Standards of Conduct Ethics (2012) state that social workers are required to prioritise the wellbeing of people they support by means of empowering them and by being respectful and empathic to clients to allow self-determination in the intervention process (NASW, 2008). For social service providers to render effective services, they must be well-trained in improving their skills and knowledge. Therefore, these social work ethics and values should also apply to people who have problems of substance abuse such as alcohol (Galvani, 2015). The social work ethics are also applicable to other social service providers who render services to vulnerable groups. When the participants were asked to indicate who is responsible to connect single mothers to the available services, the majority commented that social workers are accountable to connect them. In response to this question, surveyed participants indicated that:

“Normally I (social workers) would connect them.” Participant 1

“We social workers refer them and also do follows up.” Participant 2

“We (social workers) do the referrals by means of writing a letter to the manager of SANCA as well as telephonically to confirm the referral.” Participant 8

The broker role is one of the role of social worker's to connect clients to the available resources and services. This role can be helpful to single mothers who misuse alcohol in dealing with their current challenges (Hepworth et al., 2013). Therefore, the above narratives clearly show the willingness of social workers by connecting single mothers with alcohol misuse problems to available services such as treatment centres. However, little has been said on how far the social workers are able to support them.

This could be an as issue in terms of support needed by these mothers. The evidence also shows that many social work and social care professionals are not clear what they should be doing in relation to substance use. Furthermore their role expectations vary according to their specialist area of practice, their knowledge of substance use, and their levels of confidence (Dance & Galvani 2014; Galvani et al., 2011; Hutchinson et al., 2013; Loughran et al., 2010). For the profession of social work to engage fully with substance use, it needs clarity over the roles and function its social workers should fulfil along with the capabilities they need to do so effectively. This clarity needs to begin at a qualifying training level and extend into continuing professional development.

4.4.3.2 Subtheme 3.2: Organisations

According to Engelbrecht (2014), “organisations can be defined as a group of people who are working together to achieve a common goal”. In social work context, organisations can be viewed as human services where the goals are always focused on improving the lives of the people being served (Engelbrecht, 2014). It should be noted that organisations can be interchangeable especially in a social work framework, which is why most authors prefer to refer to social service organisations which may include non-profit organisations, non-governmental organisations, social welfare organisations, etc. (Engelbrecht, 2014). For the purpose of this subtheme, the focus will be on social welfare organisations such as child welfare and rehabilitation organisations.

The narrative below demonstrates the lack of availability of social service organisations to support single mothers who misuse alcohol and their families.

“Uhm ... in our community I can say no because we are the only organisation who are working with these mothers, even if we refer them its outside the community and I must tell you that it’s a challenge because it’s easy for them to relapse, so there is lack of support system especially when someone is really willing to change.” Participant 3

From the stated narrative, the majority of the participants showed a lack of knowledge on this question in terms of whether there are available social service organisations to provide support to these families which is why they constantly indicated the following categories. Carelse (2017) emphasises the importance of services that are accessible and available to service users in the field of substance misuse and how these services are often not sufficient, especially in communities where there is great need for these services.

a. Child welfare organisations

One of the well-known organisations in South Africa, Child Welfare aims to promote a safe and secure environment for children through protecting them from various types of maltreatment and exploitation. Overall, the Child Welfare Organisation South Africa advocates for the development of children’s rights by means of safeguarding the relevance thereof in terms of the National Policy and Legislation that is expected to protect and enrich children’s lives (Child Welfare, 2019). This goes with other well-known networks and partnerships in achieving the same objective (RSA, 2016). In this category, the majority of the surveyed participants identified Child Welfare as one of the organisations available in most communities that can assist vulnerable families, even though it is mostly the children of such families. As clearly stated children are Child Welfare’s main priority, however in cases where the mother causes the children to be vulnerable, by misusing alcohol, Child Welfare would refer the mother to respective organisations that deal with substance abuse. The following are responses from the interviewed participants.

“Uhm ... well it depends because we do not force them to get help ... we focus on child protection services that’s our priority ... so we do talk to them and refer them to substance rehab organisations, but it is mostly useful to those that are willing to get help which is very rare.” Participant 4

“Okay, not within the facility so as a children’s organisation we work in a triangular manner where the external social worker from the referring agency would be the ones to see if the child is in need of care and remove the child from their mothers if they are neglected due to alcohol misuse of a mother. So, we work with children by providing a safe care and counselling to them ...” Participant 8

“Uhm, well most organisations focus on child protection services, so very few organisations are mainly focusing on them. Rehabs are always full especially the unpaid ones” So, the focus is on children.” Participant 16

Based on the above responses and the literature of Carelse (2017) and Jacobs (2018) it is clear that most available welfare organisations are child protection organisations that are not always helpful to single mothers with an alcohol misuse problem, as the core function of these organisations are to support children. This approach is also supported by the main principles of the Children’s Act 38 of 2005 (RSA, 2005) which attends to the provision of care, safety, and support for children. It is thus clear that more services should be made available to support those (adults and specifically single mothers) with substance misuse issues.

b. Rehabilitation organisations

One of the objectives of the White Paper for Social Welfare (RSA, 1997) was to facilitate the provision for developing social welfare services to all South African vulnerable individuals, families, and communities. The focus of the White Paper is to ensure that social service organisations such as rehabilitative, preventative, developmental, and protective services are available to all in need. Thus, rehabilitative services are interrelated to single mothers with an alcohol misuse problem as indicated by the interviewed participants. Therefore, rehabilitative services were repeatedly mentioned by the participants as organisations that could be useful to support mothers with alcohol problems. However, when referring to rehabilitative services it must be understood that some charge a rate while others do not. What raised concern during the data collection was that most participants indicated long waiting lists for centres that are free compared to those that are private. In respect to this question, participants narrated as follows:

“As a family counselling organisation, if ever the single mother is misusing alcohol we refer them to SANCA, however, we first arrange meetings with her to find out what kind of support she requires then if the problem is bigger we refer to SANCA to deal with addiction whilst we continue with counselling.” Participant 6

“SANCA does provide outpatient programmes which includes few sessions during the week and its payable services.” Participant 20

“Welfare organisations such as addiction centres which provides rehabilitative services or centres, preventative services.” Participant 19

In view of the above narratives, it can be concluded that there are existing rehabilitation organisations that are available for single mothers misusing alcohol, such as SANCA. There are also social service providers who view the rehabilitation centres as the best option in treating and supporting single mothers who misuse alcohol. However, the challenges as highlighted by the participants are firstly, that most treatment centres are not affordable and secondly that the treatment centres who are free, have long waiting lists. These observations are confirmed by authors such as Dada et al. (2018) and Jacobs (2018).

4.4.3.3 Subtheme 3.3: Support groups (parenting support groups)

Sibula (2007) defines support as a method in social work practice designed to help clients by means of encouragement, generalisations, and acceptance to diminish tension and promote self-confidence (Sibula, 2007). It is suggested that this kind of support is mostly helpful to vulnerable, exposed, and helpless people. Psychologists of abnormal behaviours define support groups as members who provide companionship to one another (Kail & Cavanaugh, 2019).

In social work, the most crucial aspects include assessment, support, and care for people who are in need of special services. Connecting and empowering clients to available services and publicly supporting vulnerable groups are also vital. Support groups help their members obtain a sense of self-worth and empowerment which contributes to positive change and hope (Hepworth et al., 2013). However, in this subtheme, there were different views when answering this question about support groups. Most participants acknowledged the usefulness for parenting support groups

when working with single mothers who have alcohol problems, whilst others were not supportive of this idea due to practical obstacles such as transport. Those who were in favour of parenting support groups responded by saying the following:

“In cases of single mothers, we have support groups such as parenting groups then in conjunction with that we also have ABBA where we refer those mothers to this programme.” Participant 2

“We also make use of parenting skills groups to help them understand what it means to be a mother and how important is to play a mother figure role especially if there is no father.” Participant 5

However, some of the participants were convinced that support groups are not always successful since in the most disadvantaged areas, transportation from their homes to a meeting point is always an issue due to lack of resources such as transport, or funds for taxi fees. These participants were not against the support groups per se but were more concerned about the logistics around support groups. The narrative below best describes some participants' reflections.

“Uhm ... support groups there are not enough support groups especially in vulnerable populations uhm ... like in dangerous areas say in Mitchel's Plain, even in Khayelitsha or Langa doesn't have enough support groups in such areas for example a lot of people do not have transport so people find it difficult to get to the places where they can get services safely.” Participant 10.

Based on the reported views it may be concluded that parenting support groups could be useful to single mothers, but that they are not always accessible. Authors (Carelse, 2018; Hepworth et al., 2016; Dada et al., 2018; Jacobs, 2018) maintain that support groups are very useful to those who have been through the same issues and are able to share their experiences first-hand. For instance, the support parenting groups could be useful as it will allow single mothers with alcohol problems to share their experiences and ideas and so to encourage emotional support for each other.

a. Alcoholic Anonymous

Segal (2013) suggests that the Alcoholics Anonymous (AA) organisation consists of self-help groups that are helpful to people who want to deal with their problem within a

spiritual context. Thus Segal (2013) describes AA as a fellowship for men and women where they can share their similar experiences with the aim of acquiring strength and hope in order to solve and recover from their common problems (Segal, 2013). As supported by Quinn and Cranford (2014) AA is one of the social support groups that could play a vital role in encouraging vulnerable groups to change drinking behaviours, and for purposes of this study, assist single mothers who misuse alcohol. Therefore, during the interviews, when participants were asked to indicate available support groups to single mothers misusing alcohol, several indicated the AA.

“Uhm ... we ... especially when we removed children due to child neglect or abused caused by alcohol abuse of a mother, we try to link them with programmes, such as the AA and we do support services such as parenting skills, we will work with the whole family, but this is when they are willing. The challenge is that they will commit themselves to change just because they want their children back because after one or two weeks, they took back their children they will relapse.” Participant 8

“Because we are a family counselling organisation, we do not have structures to help them except the support group for these mothers established in this organisation. But organisations such as SANCA, METRIX, AA are providing services to them but only if we referred them.” Participant 12

From these responses, it is clear that the AA group is well-known in assisting vulnerable groups trying to change their behaviours as stated by the participants. However, the AA can only help and support those who struggle with addiction if they want to change (Fisher & Harrison, 2013). Therefore, if single mothers who have a drinking problem do not realise that they need to change their behaviour, the AA will not be effective. As one participant mentioned:

“I won’t lie to you there are a few organisations, even with AA but it’s not useful to them since it’s a self-help group. Often these mothers do not want to commit especially if there is a social worker involved.” Participant 9

According to literature (Hepworth et al., 2013) social workers’ roles include facilitating, supporting, leading, and mediating. It is suggested that for a group to grow and to achieve set goals, such a group must be guided or facilitated by a professional helper. Researchers have been known to warn non-professional self-help groups that they

may cause problems in group discussions, such as upsetting some group members or increasing members' stress levels. It is said that it is always difficult to measure whether all group members joined the group for a common purpose. In this regard, it may be concluded that AA might not always be useful to support single mothers with alcohol problems.

However, it is crucial to note the advantages of joining AA, as people suffering from alcoholism often feel more comfortable sharing their experiences and getting their feelings out in the open. With others who have experienced similar situations, people generally feel less isolated when sharing their experiences (Fisher & Harris, 2013).

This theme discussed the responses of the participants about the roles of social workers and other social service providers to single mothers who misuse alcohol and about different types of support groups that could support single mothers with alcohol misuse problems.

It emerged that NGOs such as Child Welfare organisations, rehabilitation centres, support groups, including parenting groups and Alcoholic Anonymous (AA) can all play a supportive role to single mothers who experience alcohol related problems. The following section will discuss the last theme of the study which is the macrosystem.

4.4.4 Theme 4: Macrosystem

This theme is adopted on the fourth level of the Ecological Systems Theory perspective as set out in Table 4.2. This level incorporates the larger view of the whole system since it differs from the other systems previously discussed (Rosa & Tudge, 2013). To better understand macrosystems from other systems in social work practice, Hepworth et al. (2013) state that this kind of level is removed from direct delivery services and that social workers are seen as change agents when working with private and or public governmental organisations. Nonetheless, it is important to note that this level may also directly influence individuals particularly, single mothers' families.

In this theme, two subthemes were derived, these are policy and legislation as well as culture. During the interview process, only two categories were formed. The following section discusses the first subtheme.

4.4.4.1 Subtheme 4.1: Policy and Legislation

The social service workforce is regulated by the Policy for Social Service Practitioners. The Social Service Professions Act 110 of 1978 aims to transform the social services sector and to make the legislation more inclusive of a broader range of social service practitioners. One of the goals of the Policy framework is to guide and improve the legislation that serves as a regulatory agenda for social service practitioners, but most importantly to help practitioners recognise the human resources required to provide effective social work services (Department of Social Development, 1978).

The White Paper for Social Welfare (RSA, 1997) aims to facilitate the implementation of a comprehensive, integrated, rights-based, well-resourced and quality social welfare service. One of the advantages of the White Paper for Social Welfare is that it focuses on giving the direction regarding integrated services to be provided within communities including the coordination with other sectors (Lombard, 2015).

As discussed earlier, to reduce the harm caused by the misuse of alcohol, it is imperative to follow the laws and policies in place to achieve this goal. In this context, during data collection, participants were asked to indicate policy and legislation available to single mothers misusing alcohol.

In response to this question, most participants stated the Children's Act 38 of 2005 (RSA, 2005) as the main act that they apply, backed by their reasons. However, some of the participants mentioned the Prevention of and Treatment for Substance Abuse Act 70 of 2008 (RSA, 2008) as one they also refer to when working with these mothers.

“Uhm ... yes, we do such as Substance Abuse Act, and also, we use Children's Act because there are kids involved.” Participant 11

“Yes, because after care have their own policy and early intervention has their own ... Yah, in this organisation we work under the policy of Substance Abuse Act.” Participant 12

“Because alcohol is under the umbrella of substance act then when it comes to these cases, we normally refer to the Substance Abuse Act and of course to Children's Act if their children involved.” Participant 17

“Not that I know, but in general since we mostly focus on child protection then we use Child Justice Act, and Children’s Act.” Participant 3

“The only policy we mostly refer to is the Children’s Act as a child protection organisation otherwise I do not know any of other policies.” Participant 5

Based on the above narratives, two categories emerged, namely, the Children’s Act 38 of 2005 and the Prevention of and Treatment for Substance Abuse Act 70 of 2008.

a. Children’s Act 38 of 2005

The Children’s Act 38 of 2005 (RSA, 2005) originated from the Bill of Rights enshrined in the Constitution of South Africa 108 of 1996 (RSA, 1996). The first objectives of the Children’s Act focus on promoting the preservation and strengthening of families but most importantly, it provides the essential social services including child protection and care, and development and wellbeing of children (RSA, 2005).

The Department of Social Development as well as various non-profit organisations are mostly guided by the Children’s Act to render services, especially when protecting children. Section 28 of The Bill of Rights in Chapter 2 of the Constitution of the Republic of South Africa (RSA, 1996) clearly states all the rights for children in South Africa and shows how significant the promotion and protection of children especially, from maltreatment, neglect, abuse and/or degradation, are.

During the data collection process, most participants indicated the Children’s Act 38 of 2005 as the major policy they rely on when rendering services to single-mother families where the families are affected by the misuse of alcohol by the mothers. This is because their main concerns are usually the protection of the child. Even though some of their responses show that they do not deal with single mothers directly, the participants work with other multi-disciplinary teams by means of referring them to the relevant available organisations but continue work with children if necessary. Most participants summed it up as follows:

“Well, our policies are focusing on the child and giving care and protection to the child which is mostly done through the Children’s Act and of course our statutory work and family work would be done by external agencies or social workers, but one policy is to maintain the relationship between the mother and the child. So, this is an obligation

that if the mother is in the condition to be able to care for the child then the child can be placed for family preservation in terms of the rights of the mother. We do not have policies that are catered for them specifically.” Participant 8

“I can say that I am not aware since we focus on children’s wellbeing where we use Children’s Act, therefore we refer the mother to the rehab and then work with the child.” Participant 3

“The only policy we mostly refer to is the Children’s Act as a child protection organisation otherwise I do not know any of other policies.” Participant 7

“Yah! ... when there is neglect and abuse we use Children’s Act, of course to help push the seek help, we also always work with the court system to commit them by means of enforcing them to go for help if they do want but that is the last resort.” Participant 5

“The main organisation’s policy is the breathalysed test to make sure they do not hang around with their kids under the influence of alcohol, and of course the Children Act 38 of 2005.” Participant 12

In view of the above responses, it may be concluded that the Children’s Act (RSA, 2005) is useful to child welfare organisations in protecting children’s rights. Therefore, based on their reflections, social service providers and in particular social workers, regard the Children’s Act as the most suitable policy to protect vulnerable children.

According to literature (Hepworth et al., 2013) children, as the most vulnerable group in society, need special protection since they are dependent on others, including parents and family members. As a result, the drafted South African Constitution Act 108 of 1996 have made children’s rights a priority in this country (RSA, 1996).

b. Prevention of and Treatment for Substance Dependency Act 70 of 2008

Literature chapters of this study have provided the meaning and the purpose of the Act on Prevention of and Treatment for Substance Dependency 70 of 2008 (RSA, 2008) in relation to substance abuse and in combating the challenges caused by the misuse of substances. Interestingly, this legislation is what social service providers such as social workers and community keepers use to work with people who have substance

abuse problems (Galvani et al., 2015). However, it should also be noted that social workers are not experts in everything. Therefore, in order for social workers to deliver effective services to single mothers with alcohol misuse problems, the Act on Prevention of and Treatment for Substance Dependency 70 of 2008, is recognised and available to assist social workers in reducing the harm of alcohol misuse within single mother's families.

The research done by Galvani et al. (2015) highlights the major roles of social workers when working with substance abuse cases. This goes with the instructive part of Act 70 of 2008 that aims to prevent and treat substance dependency. According to these authors such roles include firstly to engage, secondly to motivate, and thirdly to support and maintain changes into new behaviours.

When participants were asked to reflect on policy and legislation they might utilise to assist or support single mothers affected by alcohol misuse, some of them highlighted the Substance Abuse Act 70 of 2008. The following narratives support their views:

"Uhm, the rehab that I am working at is very religious based, so their framework is the Bible. But we do refer to substance abuse act." Participant 16

"Well the Children's Act is always number one and every day, but of course if it concerns the field of substance abuse then we consult the Substance Abuse Act and yah ... with the White Paper for Social Welfare." Participant 20

In viewing the above discussion, and even though the participants did not relate in detail how useful the act is in supporting and assisting clients, it is clear that some social service providers, especially social workers, view Act 70 of 2008 as a positive option for helping single mothers affected by alcohol misuse.

What the discussion also revealed is that some of the participants were not clear about the instructive part of Act 70 of 2008, mostly because they were not knowledgeable about the act. Galvani et al. (2015) argue that for social workers to fully engage with clients misusing substance, clarity over their roles and functions is needed to effectively respond to their clients' needs. Therefore, this goes back to how much training is needed for social workers to render effective services.

4.4.4.2 Subtheme 4.2: Culture

According to Macionis and Plummer (2012) designs for living defines culture. Culture includes “values, beliefs, behaviour, practices, and material objects that constitute a people’s way of life”. Macionis and Plummer continue that culture is interchangeable, and it is not inherently natural to humanity. Thus, the way people think and behave is shaped by their culture (values and beliefs). When participants were asked to reflect on their knowledge about the impact culture has on single mothers who need help regarding their alcohol problem, two categories emerged, namely stigma or stereotype, and language.

The following comment by one participant best describes how she views stigma or stereotype, and language as the major cultural impact to single mothers who need help to change their behaviour.

“You know, when it comes to blacks, we do not really want to own the diagnosis. So, I would say it really affect them because they fear of being stigmatised, our strongest weakness is that we always pay attention to what has been said in the society rather than focusing on positive outcomes and again remember language is always an issue to our people remember English is not our mother tongue so they are not confident enough to visit these places.” Participant 17

According to research stigma from society (public stigma) can turn into a self-stigmatisation that may cause the addicted person to feel ashamed (Matthews, Dwyer & Snoek, 2017). From this perspective, the following categories further explain how participants viewed the negative impact culture has on single mothers who need help in alcohol misuse.

a. Stigma or Stereotype

Social researchers such as Matthews et al. (2017) and Lebel (2008) define stigma as an “element that has intense discrediting” which is linked to a discrimination by society against the person or persons. For instance, they argue that in most cases, the term is attached to social beings where the individual is socially stigmatised on what they believed to possess (Matthews et al., 2017; Lebel, 2008). It is vital to note that the term expresses social identity that is degraded. Stigma is often associated with negative

stereotyping which may involve an attribution of disapproval. With reference to this, most participants' responses were attached to stigma and stereotype as one of the reasons why single mothers do not seek help (Matthews et al., 2017).

The following narratives by participants reflect how much stigma and negative stereotype can impact on single mothers who need help, as they fear to be stigmatised and stereotyped by their communities and even within their families.

“Especially I would say more on African cultures it’s very stigmatised and stereotyped because it’s a new thing that people in communities are having drinking problems and often it doesn’t know to handle it because they are not used to it, uhm ...”. Participant 1

“... the stigma is mostly on the families because you will find that the family is not believing in our assistance.” Participant 6

“Something I always pick up is that, there are more rehab centres for men than for females, it stands out that it’s more acceptable for a man to abuse alcohol than female therefore, it makes them not willing to look for any help. Therefore, is a stigma attached to this.” Participant 9

With the aforementioned narratives by the participants with literature, it may be concluded that fear of being stigmatised and stereotyped is a hindrance to single mothers who need help to change the behaviour of alcohol misuse.

This can be seen in the literature of Lebel (2008) who claims that alcoholic women have significantly more negative attitudes both social and personal due to being stigmatised and stereotyped which normally makes them feel that female alcoholism is worse for them than for males (Hill & Leeming, 2014). Therefore, it is worth to conclude that the public perception of alcohol addiction is very negative to those willing to change. As literature state “coping with stigma is more related to feelings of guilt, self-blame and shame” (Hill & Leeming, 2014).

In addition, some of the participants' reactions to this question were associated with a lack of knowledge, often because of their belief systems that their behaviour is shaped by the behaviour of their forefathers, and because of a denial of especially the African culture (black communities). Then, there are some people who are also concerned

about the Coloured community and how they view alcohol. To elaborate more on these aspects, participants responded that:

“Yes, it has impact, for example in Africans, they sometimes refer to that belief that our forefathers have been using alcohol for celebration or when performing rituals but it never became a problem also in coloureds communities what I find the most is that they do not really view it as a serious problem because to them it’s more like a norm.”

Participant 4

“In terms of culture, most cases in Cape Flats culture is not hindering them to seek help because for them it’s like a norm as you find almost everyone in the house is misusing alcohol ... it’s a family thing.” Participant 8

“What I can say for my group because it’s a coloured community so what I see is that there is a vicious circle and therefore it’s almost like a norm and of course accepted within the community and in the families.” Participant 16

In viewing the above responses, it may be concluded that there are several cultural aspects that social service providers believe are hindering the behaviour to change of single mothers who misuse alcohol (Lebel, 2008).

b. Language

Sociologists view “language as the key to the world of culture”. As a result, language is defined as a system of symbols that allows members of the society to communicate with one another (Macionis & Plummer, 2012). According to Crystal (2012), English is fundamentally valued as a common language that encourages a mutual understanding and allows society to learn opportunities. However, it is vital to note that language is also socially constructed and interchangeable (Macionis & Plummer, 2015). Therefore, for clear English communication one must learn and have a strong foundation in English. This was viewed by participants during data collection, as they emphasised language to be one of the contributing factors that causes single mothers to be reluctant to seek help. The following participants exhibited this idea quite strongly:

“... and the language barrier it depends what grade but a lot of organisations are trying to adapt to African languages and obviously you know that’s the only way the proper services can be implemented because the programme is so complicated, tasks, and

activities that they have to do, if it's not your home language then how one can understand the problem, which I think more organisations need and rehabs need to adapt in everyone's languages." Participant 1

"I encounter challenges a lot culturally, because, mostly when we do group work, 99 percent you find that its Afrikaans speaking and only 2 percent is Xhosa speaking, then in that group there will be a challenge in terms of poor communication amongst group members. Well ... another challenge is that due to language barriers, it would discourage them to seek help in the community or to come to our organisations and therefore they would decide not come because they avoid being stigmatised for not being able to communicate with you or other group members." Participant 4

In response to the question it may be concluded that social service providers also believed that language, especially English, negatively influences single mothers, making them lose confidence to go out and seek help for themselves. For participants, single mothers from black communities are most vulnerable to this challenge. Language barriers are also seen by several scholars, such as Keet (2015) and Mutasa (2014) as stumbling blocks to effective service rendering.

4.5 CONCLUSION

In this chapter the findings of the research were analysed and discussed. First, the researcher reflected on the research process by providing an overview on the research question, the goals and objectives of the study, the research approach, and the design that was followed. Procedures of how the sample was obtained was also presented as well as the instrument utilised for data collection. The researcher also reflected on how data was analysed and the ethical protocol that was followed in the study.

Secondly, the researcher presented detail on the biographical details of the participants. Lastly the qualitative finding of the study was presented by means of themes, subthemes, and categories. In the following chapter the researcher will conclude this study with relevant conclusions and recommendations.

CHAPTER 5:

CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

The negative influence of alcohol misuse on individuals, families, communities, and society at large is evident. It is especially alcohol misuse of single mothers that threatens the wellbeing of their families as was discussed in previous chapters. Children in these families might be exposed to maltreatment, emotional and physical neglect, family conflict, and abuse. As was discussed in the literature chapters, the misuse of alcohol also has severe negative consequences for individuals such as psychological and physical disorders.

This chapter aims to present the conclusions from the empirical study that was conducted about the reflections of social service providers on the influence of single mothers' alcohol misuse on the wellbeing of their families. Recommendations will also be given based on the empirical findings. In addition, a final recommendation for further research based on the findings and conclusions of this study will be formulated.

The present study was designed to investigate the influence of the single mothers' alcohol misuse on the wellbeing of their families through the reflections of social service providers. In this investigation, the aim was to achieve the implementation of the research objectives as outlined in the first chapter of this study as seen in the following framework:

- Chapter 1: Introduce and motivate the study.
- Chapter 2: Present the nature and extent of alcohol misuse and its influence on individuals, families, and communities (objective 1).
- Chapter 3: Describe the family wellbeing affected by alcohol misuse of single mothers within the perspective of the Ecological Systems Theory (objective 2).
- Chapter 4: Empirically investigate the influence of alcohol misuse of single mothers on the wellbeing of their families as reflected by service providers (objective 3).

- Chapter 5: Develop relevant conclusions and recommendations regarding alcohol misuse in single-parent families (objective 4).

5.2 CONCLUSIONS AND RECOMMENDATIONS

As mentioned under section 5.1 this section includes conclusions and recommendations of the study concerning the empirical analysis and findings as discussed in Chapter 4 of this study. Conclusions and recommendations regarding the profile of the participants and the four themes namely the micro-level (theme 1), the meso-level (theme 2), the exo-level (theme 3) and macro-level (theme 4) are presented below.

5.2.1 Profile of participants

During data collection, the researcher collected data regarding the profile of the participants (social service providers) who had been working with single mothers affected by alcohol misuse. The following represents conclusions and recommendations regarding the profiles of the participants.

Conclusions

The semi-structured interviews consisted of 20 participants, which included 15 females and 5 males. The participants differed in terms of age; 8 participants were between the ages of 23 and 30, 6 were between the ages of 31 and 40 and another 6 were between 41 and 50. With regards to the qualification of the participants, most of them (14) indicated that they were qualified social workers who rendered services to individuals, families, and communities, whilst 5 of them were educators and 1 participant was a community worker. Concerning work experience, 11 of the participants mentioned that they had 2 to 4 years' working experience, 2 of them had 5 to 8 years of working experience, 4 had 9 to 15 years' experience, and 3 had between 16 and 30 years of working experience.

Recommendations

It is recommended that

- quantitative research be conducted regarding social service providers who render services in the substance misuse field in order to generalise findings.
- further research be conducted on the experiences of service providers who render services specifically to women in the substance misuse field as the participants in this study included social service providers in different fields.
- further research be conducted with women who misuse alcohol and/or other drugs in order to gain more insight from their perspective.

5.2.2 Theme 1: Microsystem

Under this theme, the study sought to understand the participants' reflections on their knowledge about single mothers who misuse alcohol. In this regard, participants were asked how they relate the influence of alcohol misuse to the background information of the single mothers misusing alcohol, including the type of area they reside in, dependents at home, employment history, income source, and their level of education. Consequently, the identified literature and the participants' views, the aforementioned categories were mostly influential at this level.

5.2.2.1 Background information of the single mothers (Subtheme 1.1)

Conclusions

The evidence from this subtheme highlights that a high unemployment rate immensely affects the wellbeing of single mothers' families which then causes high levels of stress due to lack of financial support for their children. As a result, single mothers often misuse alcohol. It may thus be concluded that alcohol misuse by single mothers is used as means of coping. The following categories provide a detailed discussion and recommendations on the mentioned subtheme.

a. Physical environment of the single mothers

Conclusions

For the purpose of this study, physical environment refers to places of residence where single mothers affected by the misuse of alcohol reside. The findings on this category suggest that a significant number of single mothers exposed to poverty resort to alcohol misuse to deal with the stress, trauma, and lack of survival resources.

Overall, it was evident that low socio-economic communities tend to have high rates of alcohol misuse in general, including single mothers, and that this may be enhanced due to their places of residence having poor access to community resources.

Recommendations

It is recommended that

- more community resources such as day care facilities and life skills groups are needed to improve living conditions for the poor as literature confirms the correlation between the lack of resources and poverty which often leads to the misuse of substance in order to cope.
- more research should be done on the high prevalence of alcohol misuse in low socio-economic communities. A better understanding of the needs of low socio-economic communities and specifically single-mother families may be beneficial to vulnerable communities.

b. Number of dependants

Conclusions

Based on literature in this category, it can be concluded that when single mothers have too many responsibilities, including having to care for several children, they experience severe pressure which could cause depression. During data collection, findings showed that the higher the number of dependents in single households' families, the greater the chances of the misuse of alcohol due to the single mother being overwhelmed.

Recommendations

It is recommended that

- more training or parenting support groups be offered to single mothers who suffer from alcohol misuse aiming to educate and link them to available resources such as clinics that offer free family planning.
- family planning clinics be made more accessible and available to women who work and cannot afford to take time off work to visit these clinics.
- single mothers in vulnerable communities be equipped with services such as programmes in parenting skills.
- programmes on life skills be made available to single mothers to enable them to utilise healthier coping skills for the stress they might experience, instead of opting for excessive drinking.

c. Employment history

Conclusions

The financial wellbeing of single mothers' and their families is very poor especially if a mother is not working. During the process of data collection, it was evident that there is a correlation between hardship and the lack of financial support systems. Based on the findings of this category, it can be concluded that a significant number of single mothers have no permanent employment. Some might have seasonal or part time jobs on surrounding farms.

For single mothers who have seasonal jobs on wine farms and who are prone to alcohol misuse, this combination could not be conducive to their and their families' wellbeing.

It is also concluded that unemployment contributes to several social challenges, such as alcohol misuse and that because of unemployment, single mothers often rely on child support grants offered by SASSA, as their main source of income.

Recommendations

It is recommended that

- more employment opportunities be created in order to improve the wellbeing of vulnerable families.
- employers should ensure that programmes regarding the negative consequences of alcohol misuse are offered where vulnerable single mothers might be employed.
- employers should aid single mothers who have an alcohol dependency.

d. Education

Conclusions

Most of the participants agreed that a low education level could lead to a lack of knowledge of the negative consequences of alcohol. Low educational levels also result in low skills and less job opportunities, which may lead to more financial stress for the single mother.

Recommendation

- It is recommended that the education level of vulnerable single mothers be improved. For instance, the general education certificate training might be considered in order to enhance the possibility of full-time employment.

5.2.2.2 Wellbeing of single mothers' families (Subtheme 1.2)

Conclusions

In this subtheme the researcher explored the wellbeing of single mothers who misused alcohol as well as the wellbeing of their families as reflected by social service providers.

It can be concluded that the wellbeing of these mothers and their families are affected in several ways as indicated below.

a. Family members***Conclusion***

As was discussed in this study, alcohol misuse does not affect the misuser only, it also affects the rest of the family. It can thus be concluded that alcohol misuse destroys family relationships which often result in child maltreatment and the dysfunction of the family. Child maltreatment include child neglect, physical abuse, and emotional abuse. Overall, alcohol misuse place children at risk and usually leads to family disharmony and strained relationships within the family.

Recommendations

It is recommended that

- family counselling should be offered and made available to both single mothers and children aiming to foster family resilience and to empower children to be able to deal with stressful situations.
- there should be well-trained social service providers who will specifically render services to single mothers and families who are affected by alcohol misuse.

b. Psychological wellbeing***Conclusions***

The heavy intake of substances in general, including alcohol, may lead to poor psychological wellbeing such as mental and emotional disorders, of both the misuser and the immediate family members or others living in the same household. This study concludes that both the mothers who misuse alcohol as well as their children are psychologically affected.

Recommendations

It is recommended that

- social service providers should be equipped to render effective services to address psychological issues that might arise due to alcohol misuse.

- a multi-disciplinary approach be followed in the substance misuse field in order to render services in a holistic manner.
- organisations make psychological services available and affordable to service users.

c. Financial wellbeing

Conclusions

As was discussed in this study, the financial wellbeing of families is hugely affected if there are issues related to alcohol misuse. Families affected by alcohol misuse often experience financial challenges which may lead to poverty and failure to fulfil children's physical needs such as food, clothing, and shelter.

Recommendations

It is recommended that

- social service providers render financial literacy services to single mothers in order to help them budget and provide for their families.
- programmes or awareness campaigns should be made available regarding the danger and cost of the use of alcohol.

d. Educational wellbeing

Conclusions

As was discussed in the study, children of alcohol users also face challenges including poor educational wellbeing. It may then be concluded that these children require specific support services regarding health, education, and social care to avoid educational problems.

Recommendations

It is recommended that

- the various departments of Social Development and Education should work together to establish specific practice guidelines for staff working with children

and families affected by alcohol misuse as this should encourage and support agencies and organisations to develop appropriate services.

- the Department of Social Development should increase the number of social workers rendering protection and prevention services in schools to vulnerable children.

5.2.3 Theme 2: Mesosystem

Two subthemes emerged under this theme, namely shebeens and peer groups (friends). The following section provides conclusions and recommendations for the mentioned subthemes.

5.2.3.1 Shebeens (Subtheme 2.1)

Conclusion

It can be concluded that shebeens have a negative influence on individuals especially single mothers that are prone to alcohol misuse. This is due to the availability and easy access (selling alcohol on credit) to places selling alcohol. It can thus be concluded that there is a close link between the way alcohol is supplied in townships and the high rate of alcohol misuse.

Recommendations

It is recommended that

- the Liquor Policy be evaluated in order to ensure that alcohol is legally and responsibly supplied.
- there should be a new regulation to ensure that all shebeens are licensed to reduce informal suppliers, and to know where, how, and to whom alcohol is supplied.
- there should be a monitoring system to ensure that liquor trading is regulated within the communities.

5.2.3.2 Peer groups (Subtheme 2.2)

Conclusions

Peer pressure generally controls the way people behave; thus, it is concluded that, thoughts and interactions of someone can be highly influenced by peers. Therefore, based on the results of this study, friends or groups play a major role in contributing to the misuse of alcohol of a single mother.

Recommendation

- To have friends or be part of groups are common during the adolescent stage, however, the characteristics and outcomes for each peer group are always common regardless of age group. Due to the purpose of the study, parenting groups for peer friends who are in the same situation (single mothers) are recommended to enhance healthy parenting methods and to challenge patterns of harmful drinking.

5.2.4 Theme 3: Exosystem

This theme focused on three different subthemes that emerged during data collection these are the role of the social workers, services that are provided by relevant organisations, as well as the role of support groups in supporting single mothers affected by problems related to alcohol misuse. Conclusions and recommendations regarding the mentioned subthemes as well as identified categories such as child welfare organisations, treatment or rehabilitation centres, parental support groups, and Alcoholics Anonymous (AA) will follow. The participants mentioned how the abovementioned types of services influence single mothers to deal with alcohol misuse.

5.2.4.1 Role of social workers (Subtheme 3.1)

Conclusions

Literature confirmed that social workers play an important role in helping vulnerable individuals and families and, for the purposes of this study, single mothers' who misuse

alcohol, and their families. The social work profession is concerned about the wellbeing of people and seek to empower them, especially oppressed and vulnerable groups.

Another significant role for social workers is to connect clients to necessary and available support services. Findings of this study also confirmed that social workers are responsible for advocating for their clients' other additional support, either as brokers, enablers, facilitators, educators, and advocates for disadvantaged individuals and families. It is therefore concluded that social workers should attempt to connect single mothers who misuse alcohol to the available services, regardless of lack of manpower and resources.

Recommendations

It is recommended that

- social workers receive ongoing in-service training in order to improve skills and knowledge mainly in the field of substance misuse so that effective services can be rendered to families suffering with the alcohol misuse of the single mother.
- as social workers are faced with a backlog of cases on a daily basis, more social workers should be appointed to divide the work in order to offer equal support and intervention to all vulnerable groups.
- social workers should also give attention to render services in the field of substance misuse.
- family specialist services should be available to all families to ensure the wellbeing of the whole family.

5.2.4.2 Organisations (Subtheme 3.2)

Conclusions

One of the advantages of the social work profession is the availability of various organisations such as non-profit organisations, non-governmental organisations, and social welfare organisations. The findings of this study contribute to the existing knowledge on the work done by the aforementioned organisations on improving, safeguarding as well as enhancing human wellbeing. Data collection revealed that most participants showed a lack of knowledge about the available welfare

organisations working closely to support single mothers affected by the problems related to alcohol misuse. Only child welfare organisations and rehabilitation centres were identified as organisations available to render services to service users.

Recommendations

It is recommended that

- there should be an increase in welfare organisations specifically rendering services to people who misuse alcohol and drugs.
- due to the unique challenges women face regarding substance misuse such as childcare there should be more specialised treatment centres only for women who struggle with a substance dependence problem.
- children affected by alcohol misuse of a parent should not be overlooked, but also receive intervention.

a. Child welfare organisations

Conclusions

One of the main principles for Child Welfare Organisation South Africa is to protect children under the age of 18 years from child maltreatment with the guidance of the Children's Act 38 of 2005. This includes protecting the child against exploitation, violence, abuse, and neglect. The best interest of the child is always a priority. Both literature and study findings confirmed that positive support to vulnerable children and families should be provided. However, it should be noted that the Organisation's main priority is the wellbeing of children rather than the whole family including single mothers who might need treatment for a substance dependency problem. Nonetheless, it is concluded that Child Welfare is rendering effective services to vulnerable children, despite having limited resources.

Recommendations

It is recommended that

- more specialised organisations be established to support families affected with alcohol misuse.

- organisations that mainly support single mothers with alcohol and drug problems should be established and made available.

b. Rehabilitation organisations

Conclusions

In view of the participants' responses, it may be concluded that services offered by rehabilitative centres are interlinked to all substance addicted people including single mothers. Rehabilitative services are also involved in supporting single mothers suffering from alcohol-related problems. However, several issues emerged, such as affordability of rehabilitation organisations to disadvantaged communities and longer waiting periods to be admitted to the rehabilitation centres that do not charge fees. The matter of transportation was also raised as an issue to access available services by single mothers.

Recommendations

It is recommended that

- more rehabilitation organisations are developed, especially in areas accessible to vulnerable groups.
- rehabilitative organisations extend their services to every vulnerable community as alcohol and drug misuse are usually rife in vulnerable communities.

5.2.4.3 Support groups (Subtheme 3.3)

Under this theme two categories emerged, namely parental support groups and Alcoholics Anonymous (AA) as indicated below.

a. Parental support group

Conclusions

The social work profession recognises the value of support groups. It can be concluded that single mothers who are misusing alcohol would benefit from support groups despite challenges such as transport and safety. It is in support groups where people can share similar experiences and challenges. It can also be concluded that people

with a substance dependency problem might not want to attend a support group, but that Alcohol Anonymous (AA) could be of value to them.

Recommendations

It is recommended that

- more structured support groups with the focus on substance misuse challenges be established specifically for mothers who struggle with addiction.
- a mentoring scheme or supervisor that mainly focus on and be responsible for support group services should be established.
- community authorities should be made actively involved to improve the wellbeing of the disadvantaged group.
- a mediator should be available during support group interventions to ensure that single mothers are empowered and that they gain more knowledge on the dangers of alcohol misuse.

b. Alcoholics Anonymous (AA)

Conclusions

As emerged from the findings of this study and literature, Alcoholics Anonymous (AA) is still regarded by many as very helpful in social support for anyone who struggles with a substance misuse problem. It can thus be concluded that AA provides valuable support. However, it can also be concluded that AA is not suitable to all service users and that some might need support aimed at their specific needs, for instance if there are psychological issues that must be dealt with. Lastly, it can be concluded that AA is a voluntary organisation and is therefore only of value for service users that realise they need help.

Recommendations

It is recommended that

- social service providers facilitate processes to enable and encourage involuntary clients who have a substance dependency problem and, specifically related to this study, single mothers who misuse alcohol.
- together with AA, more social service providers should be utilised to render services in the substance misuse field.

5.2.5 Theme 4: Macrosystem

On this level, the focus was on understanding types of policies and legislation that are available to single mothers who have alcohol problems. Also, this theme aimed to gather information on how participants view the impact of culture (language, tradition, religion) on single mothers who need help regarding their alcohol problem. Two subthemes emerged, namely, policy and legislation, and culture. On each subtheme two categories were indicated by the participants, namely, the Children's Act 38 of 2005, the Prevention of and Treatment for Drug Dependency Act 70 of 2008, stigma or stereotype and language. Conclusions and recommendations will be made through the aforementioned subthemes and categories.

5.2.5.1 Policies and legislation

Conclusions

Policy and legislation from part of every organisation as means of regulating service rendering. As was discussed in Chapter 4, one of the objectives of policy is the expansion and recognition of human resources in order to provide effective social services. Policy also function as an enabling framework to facilitate the professionalisation for social development. It can be concluded that the White Paper for Social Welfare provides guidelines for integrated services required for service delivery within communities together with other sectors. Furthermore, it can be concluded that The Children's Act 38 of 2005 may be regarded as one of the acts mostly utilised by social workers. It can also be concluded that a small minority of the participants regarded the Prevention of and Treatment for Substance Abuse Act 70 of

2008 as a useful act they could rely on to render effective services to single mothers with alcohol misuse. Further conclusions and recommendations will be presented regarding the categories that emerged from this subtheme.

a. Children's Act 38 of 2005 and the Prevention of and Treatment for Drug Dependency Act 70 of 2008

Conclusions

The Children's Act 38 of 2005 clearly states that the function of the act is the promotion and protection of the rights for all children under 18 years of age (RSA, 2005). It can be concluded that this act is the most useful and implemented act in child protection services. However, it can also be concluded that this act does not assist in protecting and promoting the wellbeing of single mothers with an alcohol dependency issue. Furthermore, it is concluded that the Prevention of and Treatment for Drug Dependency Act 70 of 2008 can be utilised to assist in reducing the harm of alcohol misuse within single-mother families.

Recommendations

It is recommended that

- as South Africa has good policies and legislation, the applicable policies and legislation should be implemented in an efficient manner to empower vulnerable groups such as single mothers who misuse alcohol.
- all social service providers undergo specialised training regarding relevant policies and legislation in their respective spheres of service delivery. As part of this training, clarity on specific roles and functions should be given with specific focus on the needs of service users.
- women who misuse alcohol receive the necessary support and services to assist them to deal with the problem and that these services should accommodate and address the needs of single mothers as well as their children.

5.2.5.2 Culture

This study confirmed that culture often serve as a hindrance to single mothers in seeking help to stop misusing alcohol. Stigma and/or stereotype as well as language were highlighted from this study as the most hindering aspects to single mothers in reaching help for behavioural change and will be discussed below.

a. Stigma or stereotype and language

Conclusions

In this study it was found that stigma from the society has such a powerful effect that the thought thereof prevents specifically female alcohol misusers in seeking help. This study also indicated that stereotypes still exist regarding females who drink alcohol excessively. Therefore, it can be concluded that single mothers who misuse alcohol fear that they will be judged and labelled by society. They fear to be diagnosed as someone that is misusing alcohol and often choose to live in denial until it is too late.

In addition, it can be concluded that language often serves as a barrier for vulnerable women to seek help. Most single mothers, especially women from disadvantaged communities, lose the confidence to speak up for themselves due to a lack of communication skills especially in English. It can further be concluded that a significant number of single mothers who need help with their alcohol problem experience a lack of belonging as they feel that most services are not meant for them due to the language barrier as was reflected by the participants. Whilst it can also be concluded that support groups are useful, group members from different cultural and language backgrounds can pose a barrier to the success of support groups.

Recommendations

It is recommended that

- social service providers should be made aware of and attempt to decrease the stigma and stereotyping that still exist regarding women and alcohol misuse.
- more educational campaigns should aim to educate the community on how they view other community members affected by alcohol misuse.

- the spirit of *Ubuntu* is embraced in an attempt to help in shaping beliefs and attitudes that are more supportive to those who struggle with alcohol problems, specifically single mothers.
- most organisations learn to adopt a language that would be suitable for all clients they serve, or that they ensure that service users have the capacity to communicate with each other in their language of choice in order to make them feel that they belong rather than to feel excluded.
- social service providers or group facilitators form groups where members will be able to understand each other.

5.3 RECOMMENDATIONS FOR FUTURE RESEARCH

This research has identified some issues that must be investigated, for instance, the fact that most single mothers who misuse alcohol remain suppressed by not receiving equal attention like other vulnerable groups, such as children and adolescents. Service provision is lacking, and the evidence found for effective intervention is biased. Further research is required to attain more information on the prevalence of the affected single mothers by alcohol misuse. More research is needed to help shape diverse frameworks and strategies to effectively engage with this vulnerable group.

Despite the policies and legislation South Africa has, it is recommended that further research be undertaken in the following areas:

- Evaluating and monitoring policy and legislation dealing with alcohol misuse of single mothers.
- Determining the effects of alcohol misuse on single mothers only, excluding the whole family.
- Establishing and discussing the negative consequences of misusing alcohol.
- Doing more research regarding the voices of women who struggle with addiction and also specifically single mothers.
- Doing similar studies in other provinces as this study was only done in the Western Cape.

- Doing more research into the substance misuse field to gain a broader understanding of factors that could contribute to the misuse of alcohol (as well as other substances).

5.4 CONCLUSION

The researcher's intention was to gain more insight into single mothers' alcohol misuse and what effect this has on the wellbeing of their families as reflected by social service providers. The Ecological Systems Theory was utilised as a theoretical framework. This chapter successfully achieved objective five of the study which was aiming to present conclusions and recommendations about single mothers' alcohol misuse on the wellbeing of their families.

The conclusions and recommendations of this chapter were presented according to the themes identified and presented in Chapter 4 of this study. The collected data, findings, and literature show that much attention is required in order to improve the wellbeing of single-mother families that are vulnerable and affected by the vast problems related to alcohol misuse.

Overall, an introduction to this study is presented to provide an overview about the challenges faced by the families of single mothers in the Western Cape that are affected by the alcohol misuse of a mother. A literature review of this study was done in Chapters 2 and 3. The empirical findings were presented in Chapter 4 and included semi-structured interviews with 20 participants comprising of 14 social workers, 5 educators and 1 community keeper. The empirical findings presented 4 themes, namely the microsystem, the mesosystem, the exosystem and the macrosystem. This last chapter presented conclusions and findings of the study.

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ANNEXURE A:

CONSENT FORM

THE INFLUENCE OF SINGLE MOTHERS' ALCOHOL MISUSE ON THE WELLBEING OF THEIR FAMILIES: REFLECTIONS OF SOCIAL SERVICE PROVIDERS

STELLENBOSCH UNIVERSITY CONSENT TO PARTICIPATE IN RESEARCH

You are asked to participate in a research study conducted by Prudence Shozi, a master's student from the Social Work Department at the University of Stellenbosch. The results of this study will become part of a research report. You are seen as a possible participant in this study because you are a service provider who has knowledge of single mothers misusing alcohol.

1. PURPOSE OF THE STUDY

The aim of the study is to gain an understanding of the reflections of social service providers on the impact of a single mother's alcohol misuse on the wellbeing of her family.

2. PROCEDURES

If you volunteer to participate in this study, we would ask you to do the following:

A semi-structured interview schedule will be utilised to gather information confidentially. You need not indicate your name or any particulars on the interview schedule. Interviews will take place at a venue that will be convenient for you.

3. POTENTIAL RISKS AND DISCOMFORTS

Any uncertainties about any of the aspects of the schedule you may experience during the interview can be discussed and clarified at any time.

4. POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY

The results of this study will allow insight into the impact of a single mother's alcohol misuse on the wellbeing of her family as reflected by service providers. This information could be used to assist single mothers who misuse alcohol and to improve service rendering to her and her family.

5. PAYMENT FOR PARTICIPATION

No payment in any form will be received for participating in this study.

6. CONFIDENTIALITY

Any information that is obtained in connection with this study and that can be used to identify you will remain confidential and will be disclosed only with your permission or as required by law. Confidentiality will be maintained by means of coding, where each interview schedule is numbered. All interview schedules will be managed, analysed, and processed by the researcher and will be kept in a safe place. This will be stored on the researcher's laptop with a password which can only be accessed by the researcher.

7. PARTICIPATION AND WITHDRAWAL

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study. The researcher may withdraw you from this research if circumstances arise that warrant doing so, e.g., should you influence other participants in the completion of their interview schedules.

8. IDENTIFICATION OF STUDENT-RESEARCHER

If you have any questions or concerns about the research, please feel free to contact me via email (18750095@sun.ac.za) or my supervisor Dr. I Slabbert, Department of Social Work, University of Stellenbosch (islabbert@sun.ac.za)

9. RIGHTS OF RESEARCH SUBJECTS

You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights, or remedies because of your participation in this research study. If you have questions regarding your rights as a research subject, contact Ms Maléne Fouché [mfouche@sun.ac.za; 021 808 4622] at the Division for Research Development.

ANNEXURE B:

SEMI-STRUCTURED INTERVIEW GUIDE

1. BIOGRAPHICAL INFORMATION

Age

Gender

Qualification

Current position/employment

How long have you been working for this organisation?

How many years do you have experience of substance misuse?

2. MICRO-LEVEL:

- Who is part of the single mother who misuses alcohol close circle (i.e. children, other family members)?
- How does alcohol affect the wellbeing of a single mother?
- How does alcohol misuse affect the functioning of the family of a single mother who misuses alcohol?
- What impact does alcohol misuse of a single mother has on her family?

3. MESO-LEVEL:

- Are there any groups that single mother can attend to help them cope with stresses?
- Are there shebeens that might have a negative influence on the mother who misuse alcohol and her family?
- What role do you think peer groups such as friends influence the mother who misuse alcohol and her family?
- What role does the school play regarding alcohol misuse?

4. EXO-LEVEL:

- What types of services are available to single mothers who have an alcohol problem?
- What community services are available to single mothers with an alcohol problem?
- What community services are available to family members?
- What type of support are available to these women and their families?

- Who (or what organisation) in the community can connect single mothers who have an alcohol problem to available services?

5. MACRO-LEVEL:

- What policies and legislations are available to single mothers who have an alcohol problem?
- What cultural views might affect play a role in assisting single mothers who need help regarding their alcohol problem?
- How does these influence the family where a mother misuses alcohol?

ANNEXURE C:

ETHICAL CLEARANCE LETTER

NOTICE OF APPROVAL

REC Humanities New Application Form 17 October 2018

Project number: 8571

Project Title: THE INFLUENCE OF SINGLE MOTHERS' ALCOHOL MISUSE ON THE WELLBEING OF THEIR FAMILIES: REFLECTIONS OF SOCIAL SERVICE PROVIDERS

Dear Miss Prudence Shozi

Your REC Humanities New Application Form submitted on **16 October 2018** was reviewed and approved by the REC: Humanities.

Please note the following for your approved submission:

Ethics approval period:

Protocol approval date (Humanities) Protocol expiration date (Humanities)

17 October 2018 16 October 2021

Please take note of the General Investigator Responsibilities attached to this letter. You may commence with your research after complying fully with these guidelines.

If the researcher deviates in any way from the proposal approved by the REC: Humanities, the researcher must notify the REC of these changes.

Please use your SU project number (**8571**) on any documents or correspondence with the REC concerning your project.

Please note that the REC has the prerogative and authority to ask further questions, seek additional information, require further modifications, or monitor the conduct of your research and the consent process.

FOR CONTINUATION OF PROJECTS AFTER REC APPROVAL PERIOD

Please note that a progress report should be submitted to the Research Ethics Committee: Humanities before the approval period has

expired if a continuation of ethics approval is required. The Committee will then consider the continuation of the project for a further year (if necessary)

Included Documents:

Document Type File Name Date Version

Research Protocol/Proposal SHOZI NOMONDE proposal 15/10/2018

Informed Consent Form ANNEXURE 2 SHOZI Informed consent 15/10/2018

Data collection tool ANNEXURE 1.docx Themes 15/10/2018

If you have any questions or need further help, please contact the REC office at cgraham@sun.ac.za.

Sincerely,

Clarissa Graham

REC Coordinator: Research Ethics Committee: Human Research (Humanities)

National Health Research Ethics Committee (NHREC) registration number: REC-050411-032.

The Research Ethics Committee: Humanities complies with the SA National Health Act No.61 2003 as it pertains to health research. In addition, this committee abides by the ethical norms and principles for research established by the Declaration of Helsinki (2013) and the Department of Health Guidelines for Ethical Research:

Principles Structures and Processes (2nd Ed.) 2015. Annually a number of projects may be selected randomly for an external audit.

ANNEXURE D:

INDEPENDENT CODER THEME VERIFICATION

I hereby declare that I have read the transcribed interview completed for this research study and I am in agreement with the themes, subthemes and categories derived from this.

(Please tick where you feel appropriate)

YES	
NO	

ANNEXURE E:

MEMBER VERIFICATION FORM



UNIVERSITY OF STELLENBOSCH DEPARTMENT OF SOCIAL WORK

MEMBER VERIFICATION FORM

Participant number: _____

I hereby declare that I have read the transcribed interview completed for this research study:

(Please tick where you feel appropriate)

YES	
NO	

I, hereby, declare, that I am in agreement with the transcribed content of the interview:

(Please tick where you feel appropriate)

YES	
NO	